

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762050

Entity Name: WAKULLA RIVER CLUB, INC.**Current Principal Place of Business:**2 RIVER PLANTATION ROAD
CRAWFORDVILLE, FL 32327**Current Mailing Address:**2 RIVER PLANTATION ROAD
CRAWFORDVILLE, FL 32327 US**FEI Number:** 73-1174914**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WEAVER, GEORGE E
284 RIVER PLANTATION RD
CRAWFORDVILLE, FL 32327-1500 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** GEORGE WEAVER

06/25/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WEAVER, GEORGE
Address 284 RIVER PLANTATION RD.
City-State-Zip: CRAWFORDVILLE FL 32327

Title OFFICER
Name LICITRA, RONNIE
Address 82 RIVER COURT
City-State-Zip: CRAWFORDVILLE FL 32327

Title TREASURER
Name JUART, ROBIN
Address 488 RIVER PLANTATION RD
City-State-Zip: CRAWFORDVILLE FL 32327

Title DIRECTOR
Name GEERS, MARYANN
Address 387 RIVER PLANTATION ROAD
City-State-Zip: CRAWFORDVILLE FL 32327

Title SECRETARY
Name HOBBS, STEVE
Address 315 RIVER PLANTATION ROAD
City-State-Zip: CRAWFORDVILLE FL 32327

Title DIRECTOR
Name DEVOSS, GORDON
Address 2 RIVER PLANTATION ROAD
City-State-Zip: CRAWFORDVILLE FL 32327

Title MANAGEMENT FIRM
Name MCKEE, KAYLA
Address 644 CAPITAL CIRCLE NE
City-State-Zip: TALLAHASSEE FL 32301

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAYLA MCKEE**MANAGING AGENT**

06/25/2020

Electronic Signature of Signing Officer/Director Detail

Date