2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2025
Secretary of State
7053835771CC

DOCUMENT# 763275

Entity Name: HUMANE SOCIETY/SPCA OF SUMTER COUNTY, INC.

Current Principal Place of Business:

994 CR 529A
LAKE PANASOFFKEE, FL 33538

Current Mailing Address:

PO BOX 67
LAKE PANASOFFKEE, FL 33538 US

FEI Number: 59-2999283

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEWART, GROVER
11353 NE 10TH TERRACE
OXFORD, FL 34484 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: GROVER STEWART 01/16/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	SECRETARY, DIRECTOR
Name	STEWART, GROVER
Address	11353 NE 10TH TERRACE
City-State-Zip:	OXFORD FL 34484

Title	DIRECTOR
Name	MCCOSTER, MAUREEN
Address	3086 JULIA COURT
City-State-Zip:	THE VILLAGES FL 32163

Title	TREASURER, DIRECTOR
Name	STEVEN, MISZKIEWICZ
Address	9721 SE 171 ARGYLL ST
City-State-Zip:	THE VILLAGES FL 32163

Title	DIRECTOR
Name	SOLOMON, MARK
Address	208 PALM AVE
City-State-Zip:	WILDWOOD FL 34785

Title	OFFICER
Name	COURTRIGHT, CHERYL
Address	2417 DUNGEE TER
City-State-Zip:	THE VILLAGES FL 32162

Title	DIRECTOR
Name	UDICK, ARLENE
Address	994 CR 529A
City-State-Zip:	LAKE PANASOFFKEE FL 33538

Title	CHAIRMAN, DIRECTOR
Name	THOMAS, DISS
Address	3138 SPANISH MOSS WAY
City-State-Zip:	THE VILLAGES FL 32163

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: GROVER STEWART SECRETARY 01/16/2025

Electronic Signature of Signing Officer/Director Detail — Date