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: JILLIAN RAMSAMMY

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 765201

Entity Name: THE APPLETON CULTURAL CENTER, INC.

Current Principal Place of Business:

3001 SW COLLEGE ROAD OCALA, FL 34474

Current Mailing Address:

3001 SW COLLEGE ROAD OCALA. FL 34474 US

FEI Number: 59-2242706

Name and Address of Current Registered Agent:

HENNINGSEN, JAMES D 3001 SW COLLEGE ROAD OCALA, FL 34474 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	: JAMES D. HENNINGSEN			02/12/2018
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	SECRETARY, TREASURER,	
Name	HENNINGSEN, JAMES	Name	DIRECTOR	
Address	3001 SW COLLEGE ROAD		MAZUR III, FRANCIS J.	
City-State-Zip:	OCALA FL 34474	Address	3001 SW COLLEGE ROAD	
		City-State-Zip:	OCALA FL 34474	
Title	DIRECTOR			
Name	PAUGH, MARK	Title	DIRECTOR	
		Name Address City-State-Zip:	BRANCATO, JOYCE	
Address	3001 SW COLLEGE ROAD		3001 SW COLLEGE ROAD	
City-State-Zip:	OCALA FL 34474		OCALA FL 34474	
Title	DIRECTOR	Title	DIRECTOR	
Name	RAMSAMMY, JILLIAN			
Addroop	3001 SW COLLEGE ROAD	Name Address	KNIFE, CHRISTOPHER	
Address	SUUT SW COLLEGE ROAD		3001 SW COLLEGE ROAD	
City-State-Zip:	OCALA FL 34474	City-State-Zip:	OCALA FL 34474	

DIRECTOR

02/12/2018

FILED Feb 12, 2018 Secretary of State CC8031958418

Certificate of Status Desired: No

Date