

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001950

**Entity Name:** HERNANDO COUNTY KENNEL CLUB, INC.

**Current Principal Place of Business:**

25442 POWELL RD.  
BROOKSVILLE, FL 34602

**Current Mailing Address:**

P.O. BOX 15311  
BROOKSVILLE, FL 34604 US

**FEI Number: 59-3323168**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BATHAUER, SUE  
25442 POWELL RD.  
BROOKSVILLE, FL 34602 US

**FILED**  
**Mar 14, 2017**  
**Secretary of State**  
**CC5327666493**

*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: SUE BATHAUER**

**03/14/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           BATHAUER, SUE  
Address        25442 POWELL RD.  
City-State-Zip: BROOKSVILLE FL 34602

Title           PRESIDENT  
Name           TREMBLAY, LISA  
Address        17038 BUDOWSKI RD.  
City-State-Zip: BROOKSVILLE FL 34614

Title           DIRECTOR  
Name           TREMBLAY, CLAUDIA  
Address        17032 BUDOWSKI RD.  
City-State-Zip: BROOKSVILLE FL 34614

Title           DIRECTOR  
Name           CHOFFY, CATHY  
Address        2126 LAREDO AVE.  
City-State-Zip: SPRING HILL FL 34608

Title           SECRETARY  
Name           ROCCO, DEBORAH  
Address        6408 PINEHURST DR.  
City-State-Zip: SPRING HILL FL 34606

Title           DIRECTOR  
Name           VESSEY, VALERIE  
Address        26160 LAMBETH RD.  
City-State-Zip: BROOKSVILLE FL 34601

Title           VP  
Name           THOMPSON, SONJA  
Address        16101 FRUITVILLE ST..  
City-State-Zip: BROOKSVILLE FL 34604

Title           DIRECTOR  
Name           STANTS, HEATHER  
Address        7919 CYPRIAN CT.  
City-State-Zip: HOMOSASSA FL 34448

**Continues on page 2**

*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: SUE BATHAUER**

**TREASURER**

**03/14/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            BUFFA, LINDA  
Address        29213 SADDLE OAKS LANE  
City-State-Zip: BROOKSVILLE FL 34602