

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008724

FILED
Mar 02, 2016
Secretary of State
CC1973482105

Entity Name: SEBRING HALL OF FAME, INC.

Current Principal Place of Business:

113 MIDWAY DR.
SEBRING, FL 33870

Current Mailing Address:

113 MIDWAY DR.
SEBRING, FL 33870

FEI Number: 02-0604147

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SWAINE, J. MICHAEL
425 S. COMMERCE AVE.
SEBRING, FL 33870 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name STEPHENSON, WILLIAM H III
Address 5313 SURREY LANE
City-State-Zip: SEBRING FL 33875

Title DIRECTOR
Name BROOKER, LUKE
Address 3875 ENCHANTED OAKS LANE
City-State-Zip: SEBRING FL 33875

Title DIRECTOR, SECRETARY-TREASURER
Name SWAINE, J. MICHAEL
Address 425 S. COMMERCE AVE.
City-State-Zip: SEBRING FL 33870

Title DIRECTOR
Name ANDREWS, MARK
Address 2871 LAKEVIEW DRIVE
City-State-Zip: SEBRING FL 33870

Title DIRECTOR
Name HAVILAND, JOHN
Address 1307 EDGEWATER POINT DRIVE
City-State-Zip: SEBRING FL 33870

Title DIRECTOR, PRESIDENT
Name SHOOP, JOHN
Address 2661 LAKEVIEW DRIVE
City-State-Zip: SEBRING FL 33870

Title DIRECTOR
Name KEIBER, SHARON
Address 2841 LAKEVIEW DRIVE
City-State-Zip: SEBRING FL 33870

Title DIRECTOR
Name BISHOP, SUSANNA
Address 128 MINI RANCH ROAD
City-State-Zip: SEBRING FL 33870

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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: J. MICHAEL SWAINE

ST

03/02/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SHOOP, JAN
Address 2661 LAKEVIEW DRIVE
City-State-Zip: SEBRING FL 33870

Title DIRECTOR
Name MAIRE, BARBARA
Address 190 LAKE DRIVE BLVD.
City-State-Zip: SEBRING FL 33875

Title DIRECTOR
Name GELDART, DONALD
Address 1006 W. PLEASANT STREET
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR
Name MAIRE, TOM
Address 190 LAKE DRIVE BLVD.
City-State-Zip: SEBRING FL 33875

Title DIRECTOR
Name PIZZO, PAUL
Address P.O. BOX 1438
City-State-Zip: TAMPA FL 33601-1438

Title DIRECTOR
Name WILDSTEIN, ALAN J.
Address 2003 US HWY 27 SOUTH
City-State-Zip: SEBRING FL 33870