

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008724

Entity Name: SEBRING HALL OF FAME, INC.**Current Principal Place of Business:**113 MIDWAY DR.
SEBRING, FL 33870**Current Mailing Address:**425 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 US**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, SECRETARY-TREASURER
Name SWAINE, J. MICHAEL
Address 425 S. COMMERCE AVE.
City-State-Zip: SEBRING FL 33870

Title DIRECTOR
Name HAVILAND, JOHN
Address 1307 EDGEWATER POINT 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 SHOOP, JAN
Address 2661 LAKEVIEW DRIVE
City-State-Zip: SEBRING FL 33870

Title DIRECTOR, VP
Name ANDREWS, MARK
Address 2871 LAKEVIEW 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 BISHOP, SUSANNA
Address 128 MINI RANCH ROAD
City-State-Zip: SEBRING FL 33870

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

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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**DST****01/18/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

Title DIRECTOR
Name MORTON, DOUG
Address 2505 DOG LEG DRIVE
City-State-Zip: SEBRING FL 33872

Title DIRECTOR
Name SWAINE, WILL
Address 145 WEST CENTER AVENUE
City-State-Zip: SEBRING FL 33870

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

Title DIRECTOR
Name ZIESENHEIM, KEN
Address 3690 LAKEVIEW DRIVE
City-State-Zip: SEBRING FL 33870