2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000003443

Entity Name: MID FLORIDA BRITTANY CLUB, INC.

Current Principal Place of Business:

EVA BAILEY 8915 QUAIL RUN DRIVE WESLEY CHAPEL, FL 33544

Current Mailing Address:

EVA BAILEY 8915 QUAIL RUN DRIVE WESLEY CHAPEL, FL 33544 US

FEI Number: 59-3230973

Name and Address of Current Registered Agent:

BAILEY, EVA 8915 QUAIL RUN DRIVE WESLEY CHAPEL, FL 33544 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

Officer/Director Detail :

Title	TREASURER	Title	PRESIDENT
Name	SCHOLEY, PAM	Name	DURNO, KATHRYN
Address	2001 GRIFFEN AVE.	Address	30 NORTH RIVER RD.
City-State-Zip:	PORT ST LUCIE FL 34952	City-State-Zip:	SEWALLS POINT FL 34996
Title	SECRETARY	Title	VP
Name	BAILEY, EVA	Name	MORRIS-BALL, SUSAN
Address	8915 QUAIL RUN DRIVE	Address	3638 LAKE DRAWDY DR.
City-State-Zip:	WESLEY CHAPEL FL 33544	City-State-Zip:	ORLANDO FL 32820
Title	BOARD MEMBER	Title	BOARD MEMBER
Name	DAVIES, VALERIE	Name	BASS, TIFFANY
Address	2941 DENHAM RD	Address	4091 STALEY RD
Address City-State-Zip:	2941 DENHAM RD COCOA FL 32926	Address City-State-Zip:	4091 STALEY RD FORT MYERS FL 33905
City-State-Zip:	COCOA FL 32926		
City-State-Zip: Title	COCOA FL 32926 BOARD MEMBER		
City-State-Zip:	COCOA FL 32926		
City-State-Zip: Title	COCOA FL 32926 BOARD MEMBER		
	Name Address City-State-Zip: Title Name Address City-State-Zip: Title	NameSCHOLEY, PAMAddress2001 GRIFFEN AVE.City-State-Zip:PORT ST LUCIE FL 34952TitleSECRETARYNameBAILEY, EVAAddress8915 QUAIL RUN DRIVECity-State-Zip:WESLEY CHAPEL FL 33544TitleBOARD MEMBER	NameSCHOLEY, PAMNameAddress2001 GRIFFEN AVE.AddressCity-State-Zip:PORT ST LUCIE FL 34952City-State-Zip:TitleSECRETARYTitleNameBAILEY, EVANameAddress8915 QUAIL RUN DRIVEAddressCity-State-Zip:WESLEY CHAPEL FL 33544City-State-Zip:TitleBOARD MEMBERTitle

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.

	SIGNAT	URE: EVA	BAILEY
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SECRETARY

08/22/2018 Date

Electronic Signature of Signing Officer/Director Detail

FILED Aug 22, 2018 Secretary of State CC8257782629

Certificate of Status Desired: No

Date