

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000010306

**Entity Name:** THE GARDEN CLUB OF SEBRING, INC.**Current Principal Place of Business:**355 WEST CENTER AVENUE  
SEBRING, FL 33870**Current Mailing Address:**PO BOX 287  
SEBRING, FL 33871 US**FEI Number: 27-0449716****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ABLES, CLIFFORD MIII  
551 SOUTH COMMERCE AVENUE  
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	P
Name	FRANCES, GLORIA
Address	9500 KINGFISHER PL
City-State-Zip:	SEBRING FL 33875

Title	VP
Name	HANEY, LINDA
Address	3914 DIVOT RD.
City-State-Zip:	SEBRING FL 33872

Title	VP
Name	COHEN, DOTTEE
Address	510 MARAVILLA AVENUE
City-State-Zip:	SEBRING FL 33875

Title	S
Name	LE FILES, PAT
Address	224 CLIFTON ST.
City-State-Zip:	SEBRING FL 33875

Title	T
Name	ADELMANN, RAY
Address	2600 OAK BEACH BOULEVARD
City-State-Zip:	SEBRING FL 33875

*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: RAYMOND C ADELMANN****TREASURER****01/11/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date