2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2018
Secretary of State
CC8297829314

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Entity Name: ARTISANS OF MOUNT DORA, INC.

Current Principal Place of Business:

134 E. FIFTH AVENUE
MOUNT DORA, FL 32757

Current Mailing Address:

C/O TREASURER, ARTISANS ON FIFTH
134 EAST FIFTH
MT DORA, FL 32757 US

FEI Number: 27-1069081

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HAM, DEBRA G
134 EAST FIFTH AVENUE
MT DORA, FL 32757 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: DEBRA G. HAM 03/19/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CHAIRMAN
Name	HERTZ, GWEN
Address	17143 SE 110TH CT RD
City-State-Zip:	SUMMERFIELD FL 34491

Title	DIRECTOR
Name	GLENNON, HEATHER
Address	P.O.BOX 1932
City-State-Zip:	MT DORA FL 32756-1932

Title	SECRETARY
Name	SAILORS, STEVE
Address	12606 CHELMSFORD COURT
City-State-Zip:	ORLANDO FL 32837

Title	DIRECTOR
Name	HERTZ, MIKE
Address	17143 SE 110TH CT. RD.
City-State-Zip:	SUMMERFIRLD FL 34491

Title	VC
Name	WHITTAKER, EVERETT
Address	3410 GREENACRES TERRACE
City-State-Zip:	THE VILLAGES FL 32163

Title	DIRECTOR
Name	ANN, BULMER
Address	3506 CAPLAND AVE
City-State-Zip:	CLERMONT FL 34711

Title	DIRECTOR
Name	HOWELL, LAURA
Address	16516 SPRING PARK DRIVE
City-State-Zip:	CLERMONT FL 34711

Title	TREASURER
Name	HAM, DEBRA G
Address	3514 HUNTERS TRAIL CIRCLE
City-State-Zip:	EUSTIS FL 32726

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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: DEBRA G HAM TREASURE 03/19/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CHRISTMAS, PATRICIA
Address	7919 SLOEWOOD DRIVE
City-State-Zip:	MOUNT DORA FL 32757

Title	DIRECTOR
Name	MELLOTT, RAYMOND
Address	1809 LAKESHORE DRIVE
City-State-Zip:	EUSTIS FL 32726