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: SHANE M. EAGLESTON

Electronic Signature of Signing Officer/Director Detail

10/09/2014 Date

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: SHANE M. EAGLESTON Electronic Signature of Registered Agent

Officer/Director Detail:

Oncer/Director Detail.			
Title	VP	Title	TREASURER
Name	MATHEWS, WALTER A	Name	MATHEWS, TRACY N
Address	17228 NW CREEK ROAD	Address	17228 NW CREEK ROAD
City-State-Zip:	CLARKSVILLE FL 32430	City-State-Zip:	CLARKSVILLE FL 32430
Title	CORRESPONDING SECRETARY	Title	PRESIDENT
Name	ANDERSON, CAROL	Name	EAGLESTON, SHANE M
Address	25806 MAIN STREET	Address	25354 N. MAIN STREET
City-State-Zip:	ALTHA FL 32421	City-State-Zip:	ALTHA FL 32421

2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N1000003145

Entity Name: ALTHA RECREATIONAL COMMITTEE, INC.

Current Principal Place of Business:

17228 NW CREEK ROAD CLARKSVILLE, FL 32430

Current Mailing Address:

P.O. BOX 223 ALTHA, FL 32421 US

FEI Number: 27-2236501

Name and Address of Current Registered Agent:

EAGLESTON, SHANE M 25354 N. MAIN STREET ALTHA, FL 32421 US

10/09/2014

Date

FILED Oct 09, 2014 Secretary of State CC8566070962

Certificate of Status Desired: No