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.

PRESIDENT

SIGNATURE: ANTHONY GLOVER

I

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N1000003145

Entity Name: ALTHA RECREATIONAL COMMITTEE, INC.

Current Principal Place of Business:

11661 NW LARAMORE RD ALTHA, FL 32421

Current Mailing Address:

P.O. BOX 223 ALTHA, FL 32421 US

FEI Number: 27-2236501

Name and Address of Current Registered Agent:

ALTHA RECREATIONAL COMMITTEE 11661 NW LARAMORE RD ALTHA, FL 32421 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	SHANE EAGLESTON			03/06/2019		
	Electronic Signature of Registered Agent			Date		
Officer/Director Detail :						
Title	VP	Title	TREASURER			
Name	MCCRONE, SHERRY	Name	UNDERWOOD, JULIE			
Address	23451 NW BLACKBOTTOM RD.	Address	19760 NW CR 275			
City-State-Zip:	ALTHA FL 32421	City-State-Zip:	ALTHA FL 32421			
Title	SECRETARY	Title	PRESIDENT			
Name	TAYLOR, JAMMIE	Name	GLOVER, ANTHONY			
Address	20626 NE JIM DURHAM RD	Address	11661 NW LARAMORE RD.			
City-State-Zip:	LOT 11 BLOUNTSTOWN FL 32424	City-State-Zip:	ALTHA FL 32421			
Title	OFFICER					
Name	ROWE, BOBBY					
Address	14701 NW COUNTY RD. 274					
City-State-Zip:	ALTHA FL 32421					

Certificate of Status Desired: No

FILED Mar 06, 2019 **Secretary of State** 0657331564CC

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03/06/2019 Date