

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000007836

**FILED**  
**Apr 29, 2019**  
**Secretary of State**  
**0719815788CC**

**Entity Name:** SEBRING CRUISE, INC. OF HIGHLANDS COUNTY

**Current Principal Place of Business:**

103 S. RIDGEWOOD DRIVE  
SEBRING, FL 33870

**Current Mailing Address:**

103 S. RIDGEWOOD DRIVE  
SEBRING, FL 33870 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HILL, STACY S  
103 S. RIDGEWOOD DRIVE  
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/D  
Name WHITLOCK, JAMES WJR.  
Address 103 S. RIDGEWOOD DRIVE  
City-State-Zip: SEBRING FL 33870

Title VP/D  
Name HILL, STACY S  
Address 103 S. RIDGEWOOD DRIVE  
City-State-Zip: SEBRING FL 33870

Title S/D  
Name WHITLOCK, KATHRYN J  
Address 103 S. RIDGEWOOD DRIVE  
City-State-Zip: SEBRING FL 33870

Title T/D  
Name TEEPLE, SUSAN J  
Address 103 S. RIDGEWOOD DRIVE  
City-State-Zip: SEBRING FL 33870

Title L/D  
Name CLARK, GWEN  
Address 103 S. RIDGEWOOD DRIVE  
City-State-Zip: SEBRING FL 33870

*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:** KATHRYN WHITLOCK

**SEC**

**04/29/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date