

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000000683

**Entity Name:** AUSTRALIAN SHEPHERD CLUB OF CENTRAL FLORIDA, INC**Current Principal Place of Business:**2740 BRANDYBUCK TRAIL  
JACKSONVILLE, FL 32223**Current Mailing Address:**2740 BRANDYBUCK TRAIL  
JACKSONVILLE, FL 32223 US**FEI Number:** 46-1785737**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SUMNER, EVANS  
2740 BRANDYBUCK TRAIL  
JACKSONVILLE, FL 32223 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:** EVANS SUMNER

03/08/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           DE LA TORRE, CHARLES  
Address        9121 94TH AVE NORTH  
City-State-Zip: SEMINOLE FL 34990

Title            TREASURER  
Name           SUMNER, EVANS  
Address        2740 BRANDYBUCK TRAIL  
City-State-Zip: JACKSONVILLE FL 32223

Title            VP  
Name           SUMNER, KATHLEEN  
Address        2740 BRANDYBUCK TRAIL  
City-State-Zip: JACKSONVILLE FL 32223

Title            SECRETARY  
Name           DE LA TORRE, LYNN  
Address        9121 94TH AVE NORTH  
City-State-Zip: SEMINOLE FL 34990

Title            DIRECTOR  
Name           STANKO, THEA  
Address        1213 HOLLOW PINE DRIVE  
City-State-Zip: OVIEDO FL 32765

Title            DIRECTOR  
Name           GRINELS, LINDSEY  
Address        1344 WILLOW WIND DRIVE  
City-State-Zip: CLERMONT FL 34711

Title            DIRECTOR  
Name           CORTES, JOSE  
Address        408 MARTIGUES DRIVE  
City-State-Zip: POINCIANA FL 34759

Title            DIRECTOR  
Name           HORN, GREG  
Address        6665 ANDERSON LAKE ROAD  
City-State-Zip: DAWSONVILLE GA 30534

**Continues on page 2**

*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:** EVANS SUMNER

TREASUER

03/08/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	WINTERS, SUSAN
Address	18 RIPPLEWOOD LANE
City-State-Zip:	PALM COAST FL 32164