

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000004610

**Entity Name:** SEMINOLE CLUB OF LAKE-SUMTER, INC.**Current Principal Place of Business:**916 NORTHSIDE DR.  
MT. DORA, FL 32757**Current Mailing Address:**PO BOX 887  
MT. DORA, FL 32757 US**FEI Number: 46-3147174****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHEPP, FRANK  
916 NORTHSIDE DR.  
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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

|                 |                   |
|-----------------|-------------------|
| Title           | T                 |
| Name            | SHEPP, FRANK      |
| Address         | 916 NORTHSIDE DR. |
| City-State-Zip: | MT. DORA FL 32757 |

|                 |                   |
|-----------------|-------------------|
| Title           | DIRECTOR          |
| Name            | SHEPP, CARLEEN    |
| Address         | 916 NORTHSIDE DR. |
| City-State-Zip: | MT. DORA FL 32757 |

|                 |                   |
|-----------------|-------------------|
| Title           | SECRETARY         |
| Name            | GATLIN, VIRGINIA  |
| Address         | 1505 SPARTAN AVE  |
| City-State-Zip: | LEESBURG FL 34748 |

|                 |                     |
|-----------------|---------------------|
| Title           | PRESIDENT           |
| Name            | SAPP, RYN           |
| Address         | 1310 MAUGANS AVENUE |
| City-State-Zip: | LEESBURG FL 34748   |

|                 |                        |
|-----------------|------------------------|
| Title           | VP                     |
| Name            | MARKS, DON             |
| Address         | 9083 LAUREL RIDGE ROAD |
| City-State-Zip: | MOUNT DORA FL 32756    |

*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: FRANK A SHEPP****TREASURER****03/01/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date