

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 26, 2016
Secretary of State
CC9922669038

Entity Name: SUNSHINE BELGIAN TERVUREN CLUB, INC.

Current Principal Place of Business:

1730 PERRY ROAD
GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

1730 PERRY ROAD
GREEN COVE SPRINGS, FL 32043 US

FEI Number: 46-4260056

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANDRA W. JOHNSON, P.A.
2110 PARK STREET
JACKSONVILLE, FL 32204 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 WETHERELL, LYNNE F
Address 1730 PERRY ROAD
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title T, D
Name NELSON, KATHY
Address 505 TIMBERCREST LANE
City-State-Zip: FLEMING ISLAND FL 32003

Title S, D
Name SHOGREN, KATHERINE
Address 4815 HIDDEN CREEK ROAD
City-State-Zip: MELBOURNE FL 32935

Title D
Name VINER, AMY
Address 430 S. 3RD STREET
City-State-Zip: MACCLENNY FL 33905

Title D
Name BASSINGTHWAIGHTE, CAROLYN
Address 1440 FRUIT COVE ROAD N.
City-State-Zip: ST. JOHNS FL 32259

Title D
Name IRVING, GILLIAN
Address 4725 HIGHGATE BLVD.
City-State-Zip: PALM HARBOR FL 34685

Title VP, D
Name LANE, LISA
Address 729 OLD LOGGERS WAY
City-State-Zip: ST. AUGUSTINE FL 32086

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: LYNNE F. WETHERELL

PRESIDENT

01/26/2016

Electronic Signature of Signing Officer/Director Detail

Date