

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

DOCUMENT# N13000010632

**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.  
2244 FORBES 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 CORLEY, VICKI  
Address 4040 CHUCKWAGON COURT  
City-State-Zip: MIDDLEBURG FL 32068

Title D  
Name NIRENBERG, CATHY  
Address 6491 SE 168 TERRACE ROAD  
City-State-Zip: OCALA FL 34481

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

Title DIRECTOR  
Name LANE, LISA  
Address 220 DARK HORSE LANE  
City-State-Zip: HASTINGS FL 32145

Title VP, DIRECTOR  
Name FLEMING, MICHELLE  
Address 2865 GODWIN ROAD  
City-State-Zip: ST. CLOUD FL 34772

*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**

**07/21/2022**

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

\_\_\_\_\_  
Date