

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13222

Entity Name: THE GILCHRIST COUNTY RECREATIONAL AUTHORITY, INC.

Current Principal Place of Business:

C/O THEODORE M. BURT
403 EAST WADE STREET
TRENTON, FL 32693

Current Mailing Address:

C/O THEODORE M BURT
PO BOX 308
TRENTON, FL 32693 US

FEI Number: 59-2877209

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURT, THEODORE M ESQ.
403 EAST WADE STREET
TRENTON, FL 32693 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: THEODORE M. BURT

04/06/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name LORD, ROGER
Address 721 NE 3RD ST
City-State-Zip: TRENTON FL 32693

Title D
Name GUTHRIE, SCOTT
Address P.O. BOX 1781
City-State-Zip: TRENTON FL 32693

Title D
Name SMITH, ROY
Address P.O. BOX 838
City-State-Zip: TRENTON FL 32693

Title D
Name SMITH, DARRELL
Address PO BOX 727
City-State-Zip: BELL FL 32619

Title DST
Name PARRISH, TERRY
Address PO BOX 82
City-State-Zip: TRENTON FL 32693

Title D
Name BRYANT, TODD
Address 6600 SW 65TH ST
City-State-Zip: TRENTON FL 32693

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: ROGER LORD

P

04/06/2016

Electronic Signature of Signing Officer/Director Detail

Date