

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15261

**Entity Name:** HEARTLAND DOG CLUB, INCORPORATED OF FLORIDA

**Current Principal Place of Business:**

1601 SUNSET DRIVE  
C/O DR LAURA VAN HORN  
SEBRING, FL 33870

**Current Mailing Address:**

1601 SUNSET DRIVE  
C/O DR LAURA VAN HORN  
SEBRING, FL 33870 US

**FEI Number:** 59-2877619

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VAN HORN, DR. LAURA  
1601 SUNSET DRIVE  
SEBRING, FL 33870 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 PD  
Name WHITE, CYNTHIA  
Address 2301 SANTA ROSA AVENUE  
City-State-Zip: AVON PARK FL 33825

Title VP  
Name DORSEY, CHERIE  
Address 831 LAKE JOSEPHINE DRIVE  
City-State-Zip: SEBRING FL 33875

Title SECRETARY  
Name HARTSEIL, APRIL  
Address 211 SQUIRREL PT  
City-State-Zip: LORIDA FL 33875

Title T  
Name HOFFMAN, PAULA  
Address 2404 STATE ROAD 17 S.  
City-State-Zip: AVON PARK FL 33825

Title D  
Name POLNY, ANN  
Address 5500 STATE ROAD 66  
City-State-Zip: SEBRING FL 33875

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: DR. LAURA M. VAN HORN**

**REGISTERED AGENT**

**01/23/2016**

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

\_\_\_\_\_  
Date