

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000004331

Entity Name: MID-FLORIDA ANTIQUE MACHINERY CLUB, INC

Current Principal Place of Business:

7935 SE 121 PLACE
BELLEVIEW, FL 34420

Current Mailing Address:

7935 SE 121 PLACE
BELLEVIEW, FL 34420 US

FEI Number: 83-0517212

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLEARWATER, STEVE
7935 SE 121 PLACE
BELLEVIEW, FL 34420 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: STEVE CLEARWATER

03/22/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BENJAMIN, CALVIN
Address 6530 SE 135TH STREET
City-State-Zip: SUMMERFIELD FL 34491

Title DIRECTOR
Name HAAS, DANIEL P
Address 4406 SW 102ND LANE ROAD
City-State-Zip: OCALA FL 34476

Title SECRETARY, DIRECTOR
Name TYRIE, RONALD
Address 548 S CANDELNUT AVE
City-State-Zip: HOMOSASSA FL 34448

Title DIRECTOR
Name ALBRECHT, DENNIS
Address 501 SE 95TH ST
City-State-Zip: OCALA FL 34480

Title DIRECTOR
Name BURGESS, ROBERT
Address 10373 SE 110TH CT
City-State-Zip: OCKLAWAHA FL 32179

Title PRESIDENT, DIRECTOR
Name CLEARWATER, STEVE
Address 7935 SE 121 PLACE
City-State-Zip: BELLEVIEW FL 34420

Title TREASURER, DIRECTOR
Name ARBUTHNOT, CHARLES
Address 6156 W WOODSIDE CIR
City-State-Zip: CRYSTAL RIVER FL 34429

Title DIRECTOR
Name SMALLRIDGE, MIKE
Address 5911 TROUBLE CREEK RD
City-State-Zip: NEW PORT RICHEY FL 34656

Continues on page 2

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: RONALD D TYRIE

SECRETARY, DIRECTOR

03/22/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP, DIRECTOR
Name ALMGREN, MARY
Address 5253 SE 38TH STREET
P.O. BOX 830501
City-State-Zip: OCALA FL 34453