

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000005272

Entity Name: JUNIOR SHEEP ASSOCIATION OF FLORIDA, INC.**Current Principal Place of Business:**2290 MUD LAKE RD
DELEON SPRINGS, FL 32130**Current Mailing Address:**PO BOX 1986
DELEON SPRINGS, FL 32130 US**FEI Number:** 83-0516555**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GOODFELLOW & CO, CPA, INC
344 S WOODLAND BLVD
DELAND, FL 32720 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	D
Name	CLAY, DAVID
Address	PO BOX 1986
City-State-Zip:	DELEON SPRINGS FL 32130

Title	D
Name	HUGHES, FAITH
Address	PO BOX 772791
City-State-Zip:	OCALA FL 34477

Title	D
Name	SMITH, LORI
Address	2290 MUD LAKE RD
City-State-Zip:	DELEON SPRINGS FL 32130

Title	D
Name	ISREAL, ANDREW
Address	1151 W OSCEOLA RD
City-State-Zip:	GENEVA FL 32732

Title	D
Name	LAWSON, REX
Address	11060 SE 128TH PLACE RD
City-State-Zip:	OKLAWAHA FL 32179

Title	D
Name	MARION, ABBY
Address	1001 NORTHWOOD DR
City-State-Zip:	DELTONA FL 32725

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: DAVID CLAY

D

04/25/2019

Electronic Signature of Signing Officer/Director Detail_____
Date