

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18171

Entity Name: SPACE COAST MUSTANG CLUB, INC.**Current Principal Place of Business:**P.O.BOX 1903
MELBOURNE, FL 32902**Current Mailing Address:**PO BOX 1903
MELBOURNE, FL 32902 US**FEI Number:** 59-3092439**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WOODROW, NICOLE
18 SUNSET ST.
SATELLITE BEACH, FL 32937 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:** NICOLE WOODROW

01/22/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PEEK, ANNA
Address 1619 SAINT ST. SE
City-State-Zip: PALM BAY FL 32909

Title VP
Name PEEK, RICHARD
Address 1619 SAINT ST. SE
City-State-Zip: PALM BAY FL 32909

Title TREASURER
Name WOODROW, NICOLE
Address 18 SUNSET ST.
City-State-Zip: SATELLITE BEACH FL 32937

Title SECRETARY
Name SNYDER, CANDICE
Address 929 PINE CREEK CIR. NE
City-State-Zip: PALM BAY FL 32905

Title DIRECTOR
Name FARLEY, ROBERT
Address 3208 SW ELIZABETH ST.
City-State-Zip: WEST MELBOURNE FL 32904

Title DIRECTOR
Name WOODROW, DAVID E
Address 18 SUNSET ST.
City-State-Zip: SATELLITE BEACH FL 32937

Title DIRECTOR
Name TRENT, ELENA
Address 68 JOY HAVEN DR.
City-State-Zip: SEBASTIAN FL 32958

Title DIRECTOR
Name CORRAL, PETER
Address 729 HALTON AVE. SW
City-State-Zip: PALM BAY FL 32908

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: NICOLE WOODROW

TREASURER

01/22/2016

Electronic Signature of Signing Officer/Director Detail

Date