2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20008

Entity Name: THE MARTIN AND CLETIS MILLING FOUNDATION, INC.

FILED Jun 11, 2018 **Secretary of State** CC2016006838

Current Principal Place of Business:

512 SE 3RD STREET OCALA, FL 34471

Current Mailing Address:

POST OFFICE BOX 670 OCALA, FL 34478 US

FEI Number: 59-6891975 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, MARTY 101 SW THIRD STREET OCALA, FL 34474 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 **SECRETARY** Title D

PATTERSON, LEONA **GUEST, HEATHER** Name Name

2739 SE 35TH STREET 10400 SE 36TH AVENUE Address Address City-State-Zip: BELLEVIEW FL 34432 OCALA FL 34471 City-State-Zip:

Title **TREASURER** Title D

Name BROWN, ELIZABETH Name CARLISLE, CHRIS Address 512 SE 3RD STREET Address 7 N.W. 28TH STREET OCALA FL 34471 City-State-Zip: City-State-Zip: OCALA FL 34475

Title Title D

Name LIVENGOOD, DANIELLE CRUZ, GINGER Name Address 151 W. HIGHWAY 329 3733 SW 80TH AVENUE Address City-State-Zip: CITRA FL 32113

OCALA FL 34481 City-State-Zip:

Title Title **PRESIDENT**

BEASELY, JENNIFER Name MARTIN, WADE Name

10351 SE MARICAMP ROAD Address 512 SE 3RD STREET Address

City-State-Zip: OCALA FL 34472 City-State-Zip: OCALA FL 34471

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.

06/11/2018 SIGNATURE: LEONA PATTERSON **SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Address

Name MCATEER, KEN 512 SE 3RD STREET

City-State-Zip: OCALA FL 34471