

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28126

**Entity Name:** WILLOUGHBY GOLF CLUB, INC.**Current Principal Place of Business:**3001 SE DOUBLETON DR  
STUART, FL 34997**Current Mailing Address:**3001 SE DOUBLETON DR  
STUART, FL 34997 US**FEI Number:** 65-0097237**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REILLY, MICHELE  
3001 SE DOUBLETON DR  
STUART, FL 34997 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 DIRECTOR  
Name SCHUBERT, JACK  
Address 3001 SE DOUBLETON DRIVE  
City-State-Zip: STUART FL 34997

Title DIRECTOR  
Name TEVIS, TERRY  
Address 3001 SE DOUBLETON DRIVE  
City-State-Zip: STUART FL 34997

Title TREASURER, DIRECTOR  
Name SONIER, DOUGLAS  
Address 3001 SE DOUBLETON DR  
City-State-Zip: STUART FL 34997

Title DIRECTOR, PRESIDENT  
Name EAST, MARY  
Address 3001 SE DOUBLETON DR  
City-State-Zip: STUART FL 34997

Title DIRECTOR, VP  
Name HALL, BILL  
Address 3001 SE DOUBLETON DR  
City-State-Zip: STUART FL 34997

Title DIRECTOR, SECRETARY  
Name LOGAN, HENRY V  
Address 3001 SE DOUBLETON DRIVE  
City-State-Zip: STUART FL 34997

Title DIRECTOR  
Name COLELLO, DANIEL R  
Address 3001 SE DOUBLETON DRIVE  
City-State-Zip: STUART FL 34997

Title DIRECTOR  
Name CANAVAN, DANIEL  
Address 3001 SE DOUBLETON DR  
City-State-Zip: STUART FL 34997

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*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: DOUGLAS SONIER****TREASURER****01/26/2021**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title               DIRECTOR  
Name               CICCONE, PETER  
Address            3001 SE DOUBLETION DR  
City-State-Zip:   STUART FL 34997  
  
Title               DIRECTOR  
Name               WEBBER, GLENN  
Address            3001 SE DOUBLETION DRIVE  
City-State-Zip:   STUART FL 34997

Title               DIRECTOR  
Name               MANZI, JAMES  
Address            3001 SE DOUBLETION DRIVE  
City-State-Zip:   STUART FL 34997