2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47641

Entity Name: SUNCOAST BASSET HOUND CLUB OF TAMPA, FLORIDA, INC.

FILED
Mar 17, 2018
Secretary of State
CC2622662251

Current Principal Place of Business:

SUE BATHAUER 25442 POWELL RD. BROOKSVILLE, FL 34602

Current Mailing Address:

SUE BATHAUER 25442 POWELL RD.

BROOKSVILLE, FL 34602 US

FEI Number: 59-3136283 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BATHAUER, SUE SUE BATHAUER 25442 POWELL RD.

BROOKSVILLE, FL 34602 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: SUE BATHAUER 03/17/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title SECRETARY, TREASURER Title DIRECTOR Name BATHAUER, SUE Name WALLACE, BOB 25442 POWELL ROAD P. O. BOX 51085 Address Address City-State-Zip: BROOKSVILLE FL 34602 City-State-Zip: SARASOTA FL 34232

Title DIRECTOR Title VP

NameBATHAUER, BERNARDNameMOORE, JULIEAddress25442 POWELL RD.Address3325 SANDY DR.

City-State-Zip: BROOKSVILLE FL 34602 City-State-Zip: ZEPHYRHILLS FL 33541

Title DIRECTOR Title PRESIDENT

Name CASEY, JEFFIE Name FERGUSON, ELLEN

Address 27 SEA ISLAND DR., S Address 5245 KIRBY THOMPSON

City-State-Zip: ORMOND BEACH FL 32176 City-State-Zip: LABELLE FL 33935

Title DIRECTOR Title DIRECTOR

NameALVAREZ, JAVIERNameDENNISON, LINDAAddress3607 MINUTE MAID RAMP RD.Address11409 SE FOSTER AVE.

City-State-Zip: DAVENPOIRT FL 33837 City-State-Zip: ARCADIA FL 34266

Continues on page 2

SIGNATURE: SUE BATHAUER

SECRETARY/TREASURER 03/17/2018

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.

Officer/Director Detail Continued:

Title DIRECTOR

Name HOLCOMB, MICHELLE

Address 13125 E. CR561A

City-State-Zip: CLERMONT FL 34715