

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

DOCUMENT# N94000005610

**Entity Name:** GOVERNOR'S HURRICANE CONFERENCE, INC.**Current Principal Place of Business:**1711 AVOCA DR.  
TARPON SPRINGS, FL 34689**Current Mailing Address:**P.O. BOX 279  
TARPON SPRINGS, FL 34688-0279 US**FEI Number:** 65-0533961**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DAINES, RENE  
1711 AVOCA DR.  
TARPON SPRINGS, FL 34689 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:** RENE DAINES

01/11/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name WOMBLE, PAUL  
Address 1890 JIM KEENE BLVD  
City-State-Zip: WINTER HAVEN FL 33880

Title DIRECTOR  
Name COYNE, MIKE  
Address 819 TAYLOR STREET, ROM 10E09  
City-State-Zip: FORT WORTH TX 76102

Title EXECUTIVE DIRECTOR  
Name DAINES, RENE  
Address 1711 AVOCA DR.  
City-State-Zip: TARPON SPRINGS FL 34689

Title DIRECTOR  
Name BLAKENEY, MARY  
Address 20 SOUTH MILITARY TRAIL  
City-State-Zip: WEST PALM BEACH FL 33415

Title DIRECTOR  
Name RIVERA, CESAR  
Address 1115 EASTERWOOD DR  
City-State-Zip: TALLAHASSEE FL 32311

Title DIRECTOR  
Name MORGAN, JACK  
Address 3356 PALM ISLAND ROAD  
City-State-Zip: JACKSONVILLE FL 32250

Title DIRECTOR  
Name BERGSTROM, PAM  
Address 2555 SHUMARD OAK BLVD  
City-State-Zip: TALLAHASSEE FL 32399

Title DIRECTOR  
Name LAMARRE, BRIAN  
Address 2525 14TH AVE, SE  
City-State-Zip: RUSKIN FL 33570

**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.*

**SIGNATURE:** RENE DAINES**EXECUTIVE DIRECTOR**

01/11/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	SHIRAH, MELISSA
Address	2555 SHUMARD OAK BLVD
City-State-Zip:	TALLAHASSEE FL 32399