

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005503

Entity Name: FRIENDS OF DUDLEY FARM, INC.**Current Principal Place of Business:**18730 W. NEBERRY RD
NEWBERRY, FL 32669**Current Mailing Address:**18730 W. NEBERRY RD
NEWBERRY, FL 32669**FEI Number:** 59-3400683**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MATTHEWS, EMELIE L
11321 NW 202ND STREET
ALACHUA, FL 32615 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:** EMELIE L. MATTHEWS

02/01/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DP
Name	MATTHEWS, EMELIE L. PRESIDENT
Address	18730 W. NEBERRY RD
City-State-Zip:	NEWBERRY FL 32669

Title	DIRECTOR, COMMISSARY
Name	TANKERSLEY, THOMAS N
Address	18730 W. NEBERRY RD
City-State-Zip:	NEWBERRY FL 32669

Title	T
Name	NEAGLE, GRACE TREASURER
Address	18730 W. NEBERRY RD
City-State-Zip:	NEWBERRY FL 32669

Title	DIRECTOR
Name	MCNULTY, SUSAN
Address	18730 W. NEBERRY RD
City-State-Zip:	NEWBERRY FL 32669

Title	DIRECTOR, SECRETARY
Name	MATTHEWS, ARCHIE
Address	18730 W. NEBERRY RD
City-State-Zip:	NEWBERRY FL 32669

Title	DIRECTOR
Name	RILEY, IRMA
Address	18730 W. NEBERRY RD
City-State-Zip:	NEWBERRY FL 32669

Title	VP
Name	AMBROSE, GAYLE
Address	18730 W. NEBERRY RD
City-State-Zip:	NEWBERRY FL 32669

Title	DIRECTOR
Name	HUGHES, GLORIA
Address	18730 W. NEBERRY RD
City-State-Zip:	NEWBERRY FL 32669

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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: EMELIE L. MATTHEWS

PRESIDENT

02/01/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MCDOWELL, LORRAINE
Address 18730 W. NEBERRY RD
City-State-Zip: NEWBERRY FL 32669

Title DIRECTOR MEMBERSHIP
Name WADE, CYDE
Address 18730 W. NEBERRY RD
City-State-Zip: NEWBERRY FL 32669

Title PAST PRESIDENT
Name WADE, ART
Address 18730 W. NEWBERRY ROAD
City-State-Zip: NEWBERRY FL 32669