

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

DOCUMENT# N97000004223

**Entity Name:** BOYS & GIRLS CLUB OF HIGHLANDS COUNTY, INC.

**Current Principal Place of Business:**

2523 US HWY 27 N.  
AVON PARK, FL 33825

**Current Mailing Address:**

P.O. BOX 1596  
SEBRING, FL 33871-1596 US

**FEI Number: 59-3468588**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BRINLING, TIMOTHY  
233 E. CENTER AVE.  
SEBRING, FL 33870 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: TIMOTHY BRINLING**

**01/07/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN, DIRECTOR  
Name BRINLING, TIMOTHY  
Address 233 E CENTER AVENUE  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name SHOOP, JAN  
Address 2661 LAKEVIEW DRIVE  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name BOWSER, CINDY  
Address 3006 DIVOT ROAD  
City-State-Zip: SEBRING FL 33872

Title CEO  
Name CORNUET, DAVID  
Address P.O. BOX 1596  
City-State-Zip: SEBRING FL 33871-1596

Title TREASURER, DIRECTOR  
Name DUNCAN, ROBERT E.  
Address 1707 DIVOT LANE  
City-State-Zip: SEBRING FL 33872

Title SECRETARY, DIRECTOR  
Name SUTHERLAND, MARIA  
Address 208 E. CANFIELD ST.  
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR  
Name BLACKMAN, TIMOTHY  
Address P.O. BOX 1824  
City-State-Zip: SEBRING FL 33871

Title DIRECTOR  
Name TYSON, TYRONE LT  
Address P.O. BOX 6925  
City-State-Zip: AVON PARK FL 33825

**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: JANICE L. REARICK**

**COO**

**01/07/2021**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            COO  
Name            REARICK, JANICE L  
Address         P.O. BOX 1596  
City-State-Zip: SEBRING FL 33871