

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722870

Entity Name: GREATER OCALA DOG CLUB, INC.

Current Principal Place of Business:

10205 NW GAINESVILLE RD
OCALA, FL 34482

Current Mailing Address:

13938 N US HWY 441
CITRA, FL 32113 US

FEI Number: 59-1581117

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARRIS, CAROL S
13938 N US HWY 441
CITRA, FL 32113 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: CAROL S HARRIS

02/16/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BRIASCO, PHILIP
Address 7 LAKE WOOD CIRCLE
City-State-Zip: Ocala FL 34482

Title VP
Name LAFRANCE, LINDA
Address 16925 SE 165TH AVE
City-State-Zip: WEIRSDALE FL 32195

Title SECRETARY
Name FULLAM-BAKER, SHIRLEY
Address 3711 SW 7TH AVE. RD
City-State-Zip: Ocala FL 34471

Title TREASURER
Name HARRIS, CAROL S
Address 13938 N US HWY 441
City-State-Zip: CITRA FL 32113

Title DIRECTOR
Name DISIENA, TONY
Address 9180 SW 104TH LN
City-State-Zip: Ocala FL 34481

Title DIRECTOR
Name ROSENSTEEL, SUE ELLEN
Address 11397 SE 92ND CT
City-State-Zip: BELLEVIEW FL 34420

Title DIRECTOR
Name LENOBEL, BRIAN
Address 3300 NW 165TH ST
City-State-Zip: CITRA FL 32113

Title DIRECTOR
Name CURL, BRENDA
Address 18991 NE 50TH ST
City-State-Zip: WILLISTON FL 32596

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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: CAROL SUE HARRIS

TREASURER

02/16/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LYSHER, LINDA
Address PO BOX 770356
City-State-Zip: Ocala FL 34477