

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763470

Entity Name: BOGGY BAYOU MULLET FESTIVAL COUNCIL, INC.**Current Principal Place of Business:**C/O LANNIE CORBIN
208 N PARTIN DRIVE
NICEVILLE, FL 32578**Current Mailing Address:**C/O LANNIE CORBIN
208 N PARTIN DRIVE
NICEVILLE, FL 32578**FEI Number:** 59-2264397**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORBIN, LANNIE
208 N. PARTIN DRIVE
NICEVILLE, FL 32578 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TD
Name MASON, LAVON
Address 208 NORTH PARTIN
City-State-Zip: NICEVILLE, FL 32578

Title PD
Name CORBIN, LANNIE
Address 1429 BAYSHORE DR.
City-State-Zip: NICEVILLE FL 32578

Title SD
Name NIEDZWIECKI, SYLVIA
Address 107 DREW CT.
City-State-Zip: NICEVILLE FL 32578

Title VD
Name ALLEN, BRIDGET
Address 4130 BEACH DRIVE
City-State-Zip: NICEVILLE FL 32578

Title DIRECTOR
Name SUMMERLIN, SCOTT
Address 1020 JOHN SIMS PARKWAY
City-State-Zip: NICEVILLE FL 32578

Title DIRECTOR
Name DYE, DEBBIE
Address 1020 JOHN SIMS PARKWAY
City-State-Zip: NICEVILLE FL 32578

Title DIRECTOR
Name SPENCE, WALTER F III
Address 301 BAYSHORE DRIVE
City-State-Zip: NICEVILLE FL 32578

Title DIRECTOR
Name HARRISSON, CYNDI
Address 1020 JOHN SIMS PKY.
City-State-Zip: NICEVILLE FL 32578

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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: DAVID LAVON MASON**TREASURE****01/10/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BISHOP, SHELIA
Address	208 NORTH PARTIN DRIVE
City-State-Zip:	NICEVILLE FL 32578