

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764658

Entity Name: MID-FLORIDA MUSTANG CLUB, INC.**Current Principal Place of Business:**37009 CALHOUN ROAD
EUSTIS, FL 32736**Current Mailing Address:**PO BOX 940894
MAITLAND, FL 32794 US**FEI Number:** 59-2977608**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASTELLI, PIA C
2213 WINTER WOODS BLVD.
WINTER PARK, FL 32792 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 D
Name HEFKE, DAVID V
Address 2213 WINTER WOODS BLVD.
City-State-Zip: WINTER PARK FL 32792

Title PRES
Name JENELLE, STEVE
Address 37009 CALHOUN RD
City-State-Zip: EUSTIS FL 32736

Title SECRETARY
Name FARR, SANDRA
Address 201 SEWELL RD
City-State-Zip: SANFORD FL 32771

Title D.
Name LAWRENCE, JAMES
Address 201 SEWELL RD
City-State-Zip: SANFORD FL 32771

Title D.
Name WEAR, KENNETH
Address 5014 TIMBER RIDGE TRAIL
City-State-Zip: OCOEE FL 32761

Title TR
Name CASTELLI, PIA CTREAS
Address 2213 WINTER WOODS BLVD.
City-State-Zip: WINTER PARK FL 32792

Title VP
Name HRITZIK, JOAN
Address 37017 SANDY LANE
City-State-Zip: GRAND ISLAND FL 32735

Title D.
Name DOMBROWSKI, JAMES
Address 1656 STEPAN COLE LANE
City-State-Zip: APOPKA FL 32703

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: PIA C. CASTELLI**TREASURER****02/15/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title D.
Name FELSHAW, HAL
Address 25 MAIN ST
City-State-Zip: WINDERMERE FL 34786

Title D.
Name KALBFELD, RICHARD
Address 647 JAMESTOWN BLVD
1164
City-State-Zip: ALTAMONTE SPRGS FL 32714

Title D.
Name HOUCK, GEORGE
Address 7901 WALDORF CT
City-State-Zip: ORLANDO FL 32817

Title D.
Name LYNN, EDWARD
Address 8843 BUTTERNUT BLVD
City-State-Zip: ORLANDO FL 32817

Title D.
Name RODRIGUEZ, JOE
Address 1019 CALIFORNIA CREEK DR
City-State-Zip: OVIEDO FL 32765