

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 764658

**Entity Name:** MID-FLORIDA MUSTANG CLUB, INC.**Current Principal Place of Business:**2213 WINTER WOODS BLVD  
WINTER PARK, FL 32792**Current Mailing Address:**PO BOX 940894  
MAITLAND, FL 32794 US**FEI Number:** 81-2203520**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 DIRECTOR  
Name CANNIZZARO, MATTHEW  
Address 209 HAZELWOOD CT  
City-State-Zip: WINTER SPRINGS FL 32708

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

Title D.  
Name LANE, KATE  
Address 1402 COMBIE AVE  
City-State-Zip: ORLANDO FL 32804

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

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

Title D.  
Name HARRIS, JERRY  
Address 540 OSCEOLA DR  
City-State-Zip: SANFORD FL 32773

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

**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****03/27/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title	SEC	Title	PRESIDENT
Name	RIVERA, ANGEL	Name	CULVER, MIKE
Address	P O BOX 6353	Address	105 DESTINY COVE
City-State-Zip:	DELTONA FL 32728	City-State-Zip:	ALTAMONTE SPRGS FL 32714