

2018 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000005917

Entity Name: PANHANDLE GERMAN SHORTHAIRED POINTER CLUB, INC.**Current Principal Place of Business:**180 MASON DR
HAVANNA, FL 32333**Current Mailing Address:**180 MASON DR
HAVANA, FL 32333 US**FEI Number:** 20-3001261**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SIMS, KERI J
5913 GRAHAM LANE
MILTON, FL 32583 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:** KERI J. SIMS

11/04/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title BOARD MEMBER
Name CARMODY, MIKE
Address 3023 RIVER RD
City-State-Zip: NAVARRE FL 32566

Title BOARD MEMBER
Name YOCKEY, BETH
Address 4021 BOND CIR
City-State-Zip: NICEVILLE FL 32578

Title SECRETARY
Name RHOADES, NANCY
Address 1332 PLATA CANADA DR
City-State-Zip: CANTONMENT FL 32534

Title VP
Name PHIPPS, SCOTT
Address 22755 POPLAR RD
City-State-Zip: ROBERTSDALE AL 36567

Title TREASURER
Name RHOADES, CLEVELAND
Address 1332 PLATA CANADA DR
City-State-Zip: CANTONMENT FL 32534

Title PRESIDENT
Name CAMPBELL, ROXANNE
Address 180 MASON DR
City-State-Zip: HAVANA FL 32333

Title BOARD MEMBER
Name YOCKEY, KEITH
Address 4021 BOND CIRCLE
City-State-Zip: NICEVILLE FL 32578

Title ASST. TREASURER
Name SIMS, KERI J
Address 5913 GRAHAM LANE
City-State-Zip: MILTON FL 32583

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: CLEVELAND E RHOADES JR**TREASURER**

11/04/2018

Electronic Signature of Signing Officer/Director Detail

Date