

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007747

Entity Name: THE EXCHANGE CLUB OF SEBASTIAN, INC.**Current Principal Place of Business:**1623 US HWY 1
SUITE B-1
SEBASTIAN, FL 32958**Current Mailing Address:**P O BOX 781155
SEBASTIAN, 32978-1155 11**FEI Number: 59-2330945****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DONINI, ANTHONY M
1623 US HWY 1
SUITE B-4
SEBASTIAN, FL 32958 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 PRESIDENT
Name MIDDLETON, WILLIAM
Address 116 KARRIGAN ST
City-State-Zip: SEBASTIAN FL 32958Title SEC
Name MCELVEEN, KAREN
Address 13600 N INDIAN RIVER DR
City-State-Zip: SEBASTIAN FL 32978Title PAST PRESIDENT
Name SLADE, JEFF
Address 948 US HWY 1
City-State-Zip: SEBASTIAN FL 32958Title VP
Name NATALE, MICHAEL
Address 8530 US HWY 1
 UNIT 2
City-State-Zip: SEBASTIAN FL 32976Title TREA
Name BEST, DIANA
Address 826 GRANDIN AVE
City-State-Zip: SEBASTIAN FL 32958

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: DIANA BEST**TREASURER****01/15/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date