# 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000010195

Entity Name: CONTINENTAL FIELD TRIAL CLUB, INC.

### **Current Principal Place of Business:**

1583 LIVINGSTON ROAD GREENVILLE, FL 32331

# **Current Mailing Address:**

1583 LIVINGSTON ROAD GREENVILLE, FL 32331

# FEI Number: 47-2335803

### Name and Address of Current Registered Agent:

FLOYD, RANDY 1583 LIVINGSTON ROAD GREENVILLE, FL 32331 US

FILED Feb 02, 2021

Secretary of State

8516311756CC

Date

Certificate of Status Desired: No

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

# Officer/Director Detail :

Title	D	Title	D
Name	COPELAND, LARRON	Name	FLOYD, RANDY
Address	1583 LIVINGSTON ROAD	Address	1583 LIVINGSTON ROAD
City-State-Zip:	GREENVILLE FL 32331	City-State-Zip:	GREENVILLE FL 32331
Title	D	Title	D
Name	MCDAVID, ROBERT DR.	Name	TERLEP, TERRY
Address	1583 LIVINGSTON ROAD	Address	1583 LIVINGSTON ROAD
City-State-Zip:	GREENVILLE FL 32331	City-State-Zip:	GREENVILLE FL 32331
Title	D	Title	D
Title Name	D SISSON, CLAY	Title Name	D THOMPSON, JOHN
	-		-
Name	SISSON, CLAY 1583 LIVINGSTON ROAD	Name	THOMPSON, JOHN 1583 LIVINGSTON ROAD
Name Address	SISSON, CLAY 1583 LIVINGSTON ROAD	Name Address	THOMPSON, JOHN 1583 LIVINGSTON ROAD
Name Address City-State-Zip:	SISSON, CLAY 1583 LIVINGSTON ROAD GREENVILLE FL 32331	Name Address City-State-Zip:	THOMPSON, JOHN 1583 LIVINGSTON ROAD GREENVILLE FL 32331
Name Address City-State-Zip: Title	SISSON, CLAY 1583 LIVINGSTON ROAD GREENVILLE FL 32331 D	Name Address City-State-Zip: Title	THOMPSON, JOHN 1583 LIVINGSTON ROAD GREENVILLE FL 32331 DIRECTOR
Name Address City-State-Zip: Title Name	SISSON, CLAY 1583 LIVINGSTON ROAD GREENVILLE FL 32331 D RIPLEY, JULIE 1583 LIVINGSTON ROAD	Name Address City-State-Zip: Title Name	THOMPSON, JOHN 1583 LIVINGSTON ROAD GREENVILLE FL 32331 DIRECTOR WALTHALL, BOB 12710 ALBERTA LAKE RD

# 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: RANDY FLOYD

MANAGER

02/02/2021

Electronic Signature of Signing Officer/Director Detail

#### **Officer/Director Detail Continued :**

TitleOFFICER/DIRECTORNameDEAL, RONALDAddress133 SHI ROADCity-State-Zip:MACON GA 31711