

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000010195

**FILED**  
**Feb 05, 2020**  
**Secretary of State**  
**6638622208CC**

**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

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FLOYD, RANDY  
1583 LIVINGSTON ROAD  
GREENVILLE, FL 32331 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 COPELAND, LARRON  
Address 1583 LIVINGSTON ROAD  
City-State-Zip: GREENVILLE FL 32331

Title D  
Name DELOACH, PAUL  
Address 1583 LIVINGSTON ROAD  
City-State-Zip: GREENVILLE FL 32331

Title D  
Name FLOYD, RANDY  
Address 1583 LIVINGSTON ROAD  
City-State-Zip: GREENVILLE FL 32331

Title D  
Name MCDAVID, ROBERT DR.  
Address 1583 LIVINGSTON ROAD  
City-State-Zip: GREENVILLE FL 32331

Title D  
Name TERLEP, TERRY  
Address 1583 LIVINGSTON ROAD  
City-State-Zip: GREENVILLE FL 32331

Title D  
Name SISSON, CLAY  
Address 1583 LIVINGSTON ROAD  
City-State-Zip: GREENVILLE FL 32331

Title D  
Name THOMPSON, JOHN  
Address 1583 LIVINGSTON ROAD  
City-State-Zip: GREENVILLE FL 32331

Title D  
Name BUSH, HANK  
Address 1583 LIVINGSTON ROAD  
City-State-Zip: GREENVILLE FL 32331

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*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

**PRESIDENT**

**02/05/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title D  
Name RIPLEY, JULIE  
Address 1583 LIVINGSTON ROAD  
City-State-Zip: GREENVILLE FL 32331

Title DIRECTOR  
Name WALTHALL, BOB  
Address 12710 ALBERTA LAKE RD  
City-State-Zip: TALLAHASSEE FL 32309