

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000007351

**Entity Name:** LEVY COUNTY HORSE CLUB TRAILRIDERS, INC.

**Current Principal Place of Business:**

10451 N W 45TH ST  
CHIEFLAND, FL 32626

**Current Mailing Address:**

PO BOX 2631  
CHIEFLAND, FL 32644 US

**FEI Number: 81-3405672**

**Certificate of Status Desired: No**

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

PREVATT, CHERRI  
10451 N W 45TH ST  
CHIEFLAND, FL 32626 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:** CHERRI PREVATT

01/14/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MCCANDLESS, GREG  
Address 13950 SW 77 PLACE  
City-State-Zip: CEDAR KEY FL 32625

Title VP  
Name PREVATT, LEWIS  
Address 10451 NW 45TH ST  
City-State-Zip: CHIEFLAND FL 32626

Title TREASURER  
Name PREVATT, CHERRI  
Address 10451 NW 45TH ST  
City-State-Zip: CHIEFLAND FL 32626

Title SEC  
Name BEESON, KATHIE  
Address 7220 NW 60TH ST  
City-State-Zip: CHIEFLAND FL 32626

Title DIRECTOR  
Name THOMAS, BENNIE  
Address 6871 S W 2ND LN  
City-State-Zip: BELL FL 32619

Title V  
Name PREVATT, LEWIS  
Address 10451 NW 45TH STREET  
City-State-Zip: CHIEFLAND FL 32626

Title T  
Name PREVATT, CHERRI  
Address 10451 NW 45TH STREET  
City-State-Zip: CHIEFLAND FL 32626

*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:** CHERRI PREVATT

**SECRETARY**

01/14/2021

Electronic Signature of Signing Officer/Director Detail

Date