

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

DOCUMENT# N18000008010

**FILED**  
**Jun 14, 2020**  
**Secretary of State**  
**2152433401CC**

**Entity Name:** SKUNK VALLEY STABLES INC.

**Current Principal Place of Business:**

1441 SKUNK VALLEY RD  
SOUTHPORT, FL 32409

**Current Mailing Address:**

1441 SKUNK VALLEY RD  
SOUTHPORT, FL 32409

**FEI Number: 83-1334336**

**Certificate of Status Desired: No**

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

UNITED STATES CORPORATION AGENTS, INC.  
5575 S. SEMORAN BLVD  
SUITE 36  
ORLANDO, FL 32822 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            GIBSON, MARY L  
Address        1441 SKUNK VALLEY RD  
City-State-Zip: SOUTHPORT FL 32409

Title            SECRETARY  
Name            CAILYN ALEXANDRA HAUGLIE  
Address        120 LIBERTY WOODS DR  
City-State-Zip: FORT STEWART GA 31315

Title            DIRECTOR  
Name            CHRISTOFFER BRYAN GIBSON  
Address        1441 SKUNK VALLEY RD  
City-State-Zip: SOUTHPORT FL 32409

Title            TREASURER  
Name            AMBERLYN MIKENSEY HYDE  
Address        1441 SKUNK VALLEY RD  
City-State-Zip: SOUTHPORT FL 32409

Title            VP  
Name            RONALD WAYNE GIBSON  
Address        1441 SKUNK VALLEY RD  
City-State-Zip: SOUTHPORT FL 32409

*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: MARY GIBSON**

**PRESIDENT**

**06/14/2020**

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

\_\_\_\_\_  
Date