2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000002576

Entity Name: WILLISTON COMMUNITY ANIMAL SHELTER, INC.

FILED Mar 11, 2024 **Secretary of State** 3154599724CC

Current Principal Place of Business:

50 NW MAIN ST WILLISTON, FL 32696

Current Mailing Address:

50 NW MAIN ST

WILLISTON, FL 32696 US

FEI Number: 84-4984372 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARSON, WAYNE 50 NW MAIN ST WILLISTON, FL 32696 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 Title PRESIDENT, TREASURER CARSON, WAYNE GOODMAN, SUE ELLEN Name Name 50 NW MAIN ST Address 840 NW 4TH AVE Address

City-State-Zip: WILLISTON FL 32696 WILLISTON FL 32696 City-State-Zip:

Title **SECRETARY** Title DIRECTOR

Name HAUBERT, CRYSTAL ROBINSON, CATHERINE Name Address 5661 NE 141ST TERRACE Address 19060 NE 31ST PL WILLISTON FL 32696 City-State-Zip: City-State-Zip: WILLISTON FL 32696

Title DIRECTOR Title **DIRECTOR**

Name CUNNINGHAM, BROOKE TAYLOR, MANDI Name Address 1290 NE 124TH TERR 650 NE HWY 41 Address City-State-Zip: WILLISTON FL 32696

Title DIRECTOR

CALDWELL, PHYLLIS Name 16251 NE 3RD PLACE Address WILLISTON FL 32696 City-State-Zip:

City-State-Zip: WILLISTON FL 32696

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.

03/11/2024 SIGNATURE: SUE ELLEN GOODMAN **PRESIDENT**