

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000845

Entity Name: DUNKLIN INTERNATIONAL TRAINING CENTER, INC.**Current Principal Place of Business:**3342 S.W. HOSANAH LANE
OKEECHOBEE, FL 34974**Current Mailing Address:**3342 S.W. HOSANAH LANE
OKEECHOBEE, FL 34974**FEI Number:** 65-0388174**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMSON, JENNIFER LESQ.
759 SW FEDERAL HWY STE 106
STUART, FL 34994 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	DIRECTOR	Title	PRESIDENT, DIRECTOR CHAIRMAN
Name	MURROW, HUGH	Name	HASKELL, TODD
Address	3342 SW HOSANAH	Address	3342 SW HOSANAH LANE
City-State-Zip:	OKEECHOBEE FL 34974	City-State-Zip:	OKEECHOBEE FL 34974
Title	D	Title	VP, DIRECTOR VICE CHAIRMAN
Name	STRAYHORN, GUY R	Name	REYNOLDS, NICHOLAS
Address	12314 RIVER RD. S.E.	Address	3342 S.W. HOSANAH LANE
City-State-Zip:	FORT MYERS FL 33905	City-State-Zip:	OKEECHOBEE FL 34974
Title	DIRECTOR	Title	DIRECTOR
Name	BOGGS, RICH	Name	WILEY, ROY
Address	4280 SW 15TH WAY	Address	711 W. INDIANTOWN RD SUITE C5
City-State-Zip:	OKEECHOBEE FL 34974	City-State-Zip:	JUPITER FL 33458
Title	DIRECTOR		
Name	JOLICOEUR, JERRY		
Address	4567 HIGHWAY 710 EAST		
City-State-Zip:	OKEECHOBEE FL 34972		

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: TODD HASKELL

VP

03/30/2018

Electronic Signature of Signing Officer/Director Detail_____
Date