

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000001799

**Entity Name:** THE MAITLAND MEN'S CLUB, INC.**Current Principal Place of Business:**641 SOUTH MAITLAND AVENUE  
MAITLAND, FL 32751**Current Mailing Address:**P.O. BOX 947711  
MAITLAND, FL 32794-7711 US**FEI Number:** 59-3458005**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GOFF, JOHN LESLIE  
1055 KENSINGTON PARK DRIVE  
309  
ALTAMONTE SPRINGS, FL 32714 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:** JOHN LESLIE GOFF

03/09/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIRECTOR	Title	DIRECTOR
Name	ALDERS, BLAKE	Name	SHELDON, GEORGE
Address	105 OAKLEIGH DRIVE	Address	611 RED SAIL LANE
City-State-Zip:	MAITLAND FL 32751	City-State-Zip:	ALTAMONTE SPRINGS FL 32701
Title	DIRECTOR, PRESIDENT	Title	DIRECTOR, TREASURER
Name	SIEBERT, BRAD	Name	GOFF, LESLIE
Address	203 FLAME AVENUE	Address	1055 KENSINGTON PARK DRIVE, UNIT # 309
City-State-Zip:	MAITLAND FL 32751	City-State-Zip:	ALTAMONTE SPRINGS FL 32714
Title	DIRECTOR, SECRETARY	Title	DIRECTOR
Name	TERAMAE, GARY	Name	DOYLE, EDWARD
Address	115 LAKE DESTINY TRAIL	Address	2331 PLEASANT DRIVE
City-State-Zip:	ALTAMONTE SPRINGS FL 32714	City-State-Zip:	LONGWOOD FL 32779
Title	DIRECTOR	Title	DIRECTOR
Name	SHURM, WILLIAN	Name	ZIEGLER, CLARK
Address	1113 NORTHERN WAY	Address	314 OAK PARK PLACE
City-State-Zip:	WINTER SPRINGS FL 32708	City-State-Zip:	CASSELBERRY FL 32707

**Continues on page 2**

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:** LESLIE GOFF**TREASURER**

03/09/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	MACMILLAN, ROBERT
Address	1041 COTTONTAIL LANE
City-State-Zip:	MAITLAND FL 32751