

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001799

Entity Name: THE MAITLAND MEN'S CLUB, INC.**Current Principal Place of Business:**544 MAYO AVE
MAITLAND, FL 32794**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:**KAHN, BERNIE
171 MARION WAY
MAITLAND, FL 32751 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:** BERNIE KAHN

02/09/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, SECRETARY
Name KAHN, BERNIE
Address 171 MARION WAY
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name SIEBERT, BRAD
Address 203 FLAME AVENUE
City-State-Zip: MAITLAND FL 32751

Title TREASURER
Name VERDERY, LEN
Address 1874 BRISTOL COURT
City-State-Zip: MAITLAND FL 32751

Title VP, DIRECTOR
Name VALDES, IVAN
Address 2001 WAYHAVEN COURT
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR, PAST PRESIDENT
Name GOFF, LESLIE
Address 1055 KENSINGTON PARK DRIVE,
UNIT # 309
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR, PRESIDENT
Name TERAMAE, GARY
Address 115 LAKE DESTINY TRAIL
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR
Name DOYLE, EDWARD
Address 2331 PLEASANT DRIVE
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name SHURM, WILLIAN
Address 1113 NORTHERN WAY
City-State-Zip: WINTER SPRINGS FL 32708

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 GOFFVICE PRESIDENT,
DIRECTOR

02/09/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WALLY, WALDHEIM
Address	750 S. LAKE SYBELIA DRIVE
City-State-Zip:	MAITLAND FL 32751