

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001797

Entity Name: DOTHAN BOAT CLUB, INCORPORATED**Current Principal Place of Business:**LAKEVIEW CIRCLE
ALFORD, FL 32420**Current Mailing Address:**3400 LEMMINGTON RD
PENSACOLA, FL 32504 US**FEI Number:** 63-6061782**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HICKS, THOMAS M
2632 LAKEVIEW CIRCLE
ALFORD, FL 32420 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 PRES
Name TYLER, JIM PRESIDENT
Address 3040 WATSON DRIVE
City-State-Zip: MARIANNA FL 32446

Title VP
Name KIRKLAND, DOUG
Address 330 DAWSEY RD
City-State-Zip: DOTHAN AL 36305

Title S/T
Name CLAYTON, KRIS SECRETARY-
TREASURER
Address 3400 LEMMINGTON RD
City-State-Zip: PENSACOLA FL 32504

Title DIRECTOR
Name HUSTED, LINDA
Address P O BOX 842
City-State-Zip: MARIANNA FL 32447

Title DIRECTOR
Name KIRKLAND, MIKE
Address P O BOX 6852
City-State-Zip: DOTHAN AL 36302

Title DIRECTOR
Name MARTIN, GENE
Address 105 FOXWORTH CT
City-State-Zip: DOTHAN AL 36305

Title DIRECTOR
Name HICKS, TOM
Address 2632 LAKEVIEW CIRCLE
City-State-Zip: ALFORD FL 32420

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: KRIS CLAYTON**SECRETARY-TREASURER** 03/31/2024_____
Electronic Signature of Signing Officer/Director Detail_____
Date