

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N0100002674

**Entity Name:** THE MATLACHA HOOKERS, INC.

**Current Principal Place of Business:**

7840 LOBEAN LANE  
BOKEELIA, FL 33922

**Current Mailing Address:**

P.O. BOX 111  
MATLACHA, FL 33993

**FEI Number:** 65-1121335

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RUSCIK, DONNA JO  
7840 LOBEAN LANE  
BOKEELIA, FL 33922 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:** DONNA JO RUSCIK

04/03/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name RUSCIK, DONNA  
Address 7840 LOBEAN LANE  
City-State-Zip: BOKEELIA FL 33922

Title VP  
Name GAYLOR, JULIA  
Address 643 NW 29TH TERRACE  
City-State-Zip: CAPE CORAL FL 33993

Title TREA  
Name SYRING, DEBRA  
Address 2211 BANANA STREET  
City-State-Zip: ST JAMES CITY FL 33956

Title SECR  
Name RYZANYCH, CAROLYN  
Address 5600 BLYTH COURT  
City-State-Zip: BOKEELIA FL 33922

Title DIRECTOR  
Name CORREIA, JOANNE  
Address 3844 PLUMERA DRIVE  
City-State-Zip: ST JAMES CITY FL 33956

Title DIRECTOR  
Name BOHACEK, LINDA  
Address 2745 SANDERLING COURT  
City-State-Zip: ST JAMES CITY FL 33956

Title DIRECTOR  
Name GAZDA, NATALIE  
Address 2006 NW 11TH COURT  
City-State-Zip: CAPE CORAL FL 33993

Title CHAPLAIN  
Name TANIA, M WATKINS  
Address 5951 BONITA ROAD  
City-State-Zip: BOKEELIA FL 33922

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*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:** DONNA RUSCIK

MADAM PRESIDENT

04/03/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name TIDWELL, LORAH M  
Address 12930 TIFFANY ROAD  
City-State-Zip: BOKEELIA FL 33922

Title DIRECTOR  
Name CONNER, DARCY  
Address 5348 SERENITY COVE  
City-State-Zip: BOKEELIA FL 33922

Title DIRECTOR  
Name RAU, CHRISTINA E  
Address 8769 WHISPERING PINES DRIVE  
City-State-Zip: ST JAMES CITY FL 33956