

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712424

FILED
Feb 02, 2009
Secretary of State

Entity Name: THE MIRACLE STRIP CORVETTE CLUB, INC.

Current Principal Place of Business:

5590 NORTH W STREET
MIRACLE STRIP CORVETTE CLUB ROOM
PENSACOLA, FL 32505 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10332
PENSACOLA, FL 32524 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, ERNEST G
7032 REDONDO DRIVE
PENSACOLA, FL 32526 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOHANNON, STEVE
Address: 4716 CONDADO CIRCLE
City-St-Zip: PENSACOLA, FL 32507

Title: TD () Delete
Name: MARTINEZ, ERNEST G
Address: 7032 REDONDO DRIVE
City-St-Zip: PENSACOLA, FL 32526

Title: D () Delete
Name: THOMAS, MATT
Address: 8063 BAYWIND CIRCLE
City-St-Zip: PENSACOLA, FL 32514

Title: VD () Delete
Name: GORDON, RICK
Address: P.O. BOX 669
City-St-Zip: GULF BREEZE, FL 32562

Title: SD () Delete
Name: BLANCHARD, KAY
Address: 9542 YARROW CIRCLE
City-St-Zip: PENSACOLA, FL 32514

Title: VD () Delete
Name: MILLS, TERRY III
Address: 5360 GALBERRY LANE
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CHRISTMAN, BRAD A
Address: 8647 RAMBLE WOODS DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ERNEST G. MARTINEZ

TD

02/02/2009

Electronic Signature of Signing Officer or Director

Date