

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 28, 2000 8:00 am**  
**Secretary of State**

01-28-2000 90087 006 \*\*\*\*61.25

**DOCUMENT # 762677**

1. Entity Name

**SUNSHINE REGION OF THE ANTIQUE AUTOMOBILE CLUB O**

Principal Place of Business

Mailing Address

4912 OLD OAKLEAF DR  
 SARASOTA FL 34233  
 US

4912 OLD OAKLEAF DR  
 SARASOTA FL 34233-3946  
 US

2. Principal Place of Business

9325 Fruitland Ave

3. Mailing Address

9325 Fruitland Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Englewood FL

City & State

Englewood FL

4. FEI Number

59-2356543

Applied For

Not Applicable

Zip

34224

Country

USA

Zip

34224

Country

USA

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KOCH, LINDA  
 4912 OLD OAKLEAF DR  
 SARASOTA FL 34233

Name

Dave Ertel

Street Address (P.O. Box Number is Not Acceptable)

9325 Fruitland Ave

City

Englewood

FL

Zip Code

34224

8. 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

*Dave Ertel* Treasurer (Dave Ertel)

1/27/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  Delete  
 NAME ROTH, CARTER  
 STREET ADDRESS 1881 LAUREL RD  
 CITY-ST-ZIP LAUREL FL 34272

TITLE  Change  Addition  
 NAME P. Tom Thomas  
 STREET ADDRESS 600 SUFFOLK Cir  
 CITY-ST-ZIP NOKOMIS FL 34275

TITLE  Delete  Change  
 NAME SLIGHT, ARNOLD  
 STREET ADDRESS 1197 LARCHMONT DR  
 CITY-ST-ZIP ENGLEWOOD FL 34233

TITLE  Change  Addition  
 NAME Change from P to A D  
 CITY-ST-ZIP D for Director

TITLE  Delete  
 NAME GOCKLEY, VERNA  
 STREET ADDRESS 3151 53RD ST  
 CITY-ST-ZIP SARASOTA FL 34234

TITLE  Change  Addition  
 NAME JACKIE FLYNN  
 STREET ADDRESS 5608 AKTUN PLACE  
 CITY-ST-ZIP SARASOTA FL 34237

TITLE  Delete  
 NAME KOCH, LINDA  
 STREET ADDRESS 4912 OLD OAKLEAF DR  
 CITY-ST-ZIP SARASOTA FL 34233

TITLE  Change  Addition  
 NAME Dave Ertel  
 STREET ADDRESS 9325 Fruitland Ave  
 CITY-ST-ZIP Englewood FL 34224

TITLE  Delete  
 NAME BERNIS, ARNOLD  
 STREET ADDRESS 1610 MEADOWOOD ST  
 CITY-ST-ZIP SARASOTA FL 34231

TITLE  Change  Addition  
 NAME V.P. Ardith Thorpe  
 STREET ADDRESS 4979 Hubner Cir  
 CITY-ST-ZIP SARASOTA FL 34241

TITLE  Delete  
 NAME GOCKLEY, CHARLES  
 STREET ADDRESS 3151 53RD ST  
 CITY-ST-ZIP SARASOTA FL 34234

TITLE  Change  Addition  
 NAME BOB BARASCH  
 STREET ADDRESS 570 Silk Oak Dr.  
 CITY-ST-ZIP Venice FL 34293

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Dave Ertel* Treasurer (Dave Ertel) 1/27/00

941-921-5857

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)