## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000002950

Entity Name: CAPE KENNEDY CORVETTE CLUB, INC.

FILED Jan 10, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

130 CARIB DR

MERRITT ISLAND, FL 32953

Current Mailing Address: New Mailing Address:

130 CARIB DR

MERRITT ISLAND, FL 32953

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

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

CAMPBELL, LLOYCE 130 CARIB DRIVE

MERRITT ISLAND, FL 32952 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

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 T
 ( ) Delete
 Title:
 T
 ( X) Change ( ) Addition

 Name:
 DILLON, JOHN
 Name:
 BONANNO, STEVEN L

 Address:
 141 E OSCEOLA LN
 Address:
 1194 THREE MEADOWS DR

 City-St-Zip:
 COCOA BEACH, FL 32931
 City-St-Zip:
 ROCKLEDGE, FL 32955

 $\label{eq:title:S} {\sf Title:S} \qquad \qquad {\sf S} \qquad {\sf (X) Change () Addition}$ 

 Name:
 MEAFEE, NEENA
 Name:
 MCAFEE, NEENA

 Address:
 7667 N WICKHAM RD 1106
 Address:
 4165 SKYWAY DR

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip:
 COCOA, FL 32927

Title: PP ( ) Delete Title: OAL (X) Change ( ) Addition

 Name:
 EVANS, BILL
 Name:
 EVANS, BILL

 Address:
 1656 SHORE DR
 Address:
 1656 SHORE DR

City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: MERRITT ISLAND, FL 32952

Title: OAL () Delete Title: VP (X) Change () Addition

 Name:
 MERRILL, JUDI
 Name:
 JOHNSON, PETER

 Address:
 3203 BUCKINGHAM LN.
 Address:
 4165 SKYWAY DR

 City-St-Zip:
 COCOA, FL 32926
 City-St-Zip:
 COCOA, FL 32927

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 CHARLES, KEVIN
 Name:
 COCHRAN, MARCIA

 Address:
 917 OCASO LN 205
 Address:
 709 ENDICOTT RD

 City-St-Zip:
 ROCKLEDGE, FL 32955
 City-St-Zip:
 MELBOURNE, FL 32940

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: STEVEN BONANNO T 01/10/2009