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FILED  
Feb 13 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N05589** (9)  
1. Corporation Name  
**FLORIDA FLYWHEELERS ANTIQUE ENGINE CLUB, INC.**



Principal Place of Business  
**7000 AVON PK CUTOFF RD  
FT MYERS FL 33853  
US**

Mailing Address  
**4 PINE RIDGE  
LAKE WALES FL 33853  
US**

3. Date Incorporated or Qualified  
**10/10/1984**

4. FEI Number  
**65-0010838**  
Applied For  
Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 **2733 Ramsey Drive**

27 Suite, Apt. #, etc.

28 City & State

29 **Apopka, FL US**

30 **ORANGE**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RUSSELL, PATSY  
2733 RAMSEY DR.  
APOPKA FL 32703**

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Patsy Russell* **Patsy Russell**

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PO	EDWARDS, RICHARD	6401 METZ RD	GROVELAND FL	<input type="checkbox"/>
VD	RUDD, ALAN	786 42 CT	VERO BEACH FL	<input type="checkbox"/>
TD	RUSSELL, PATSY	2733 RAMSEY DR	APOPKA FL	<input type="checkbox"/>
S	BERRY, DORIS M	4 PINE RIDGE	LAKE WALES FL	<input type="checkbox"/>
D	DONALDSON, LEWIS	35445 CLINTON AVE	DADE CITY FL	<input type="checkbox"/>
D	WALMER, HAROLD	1917 UPPER COVE TERR	SARASOTA FL	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
VD	HARKINS, EUGENE	1581 Grand View Blvd.	Kissimmee, FL 34744	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TD	NEWBOLD, CLEM	P.O. Box 832, #39 Mtn Lk	Lake Wales, FL 33859	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SD	RUSSELL, PATSY	2733 Ramsey Dr.	Apopka, FL 32703	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Patsy Russell* **Patsy Russell**

2-5-98

407-889-6698

CR2E037 (10/97)