FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

AMERICA'S CORVETTE CLUB, INC.

COOPER CITY FL

Ode also d Disco	- 4 P. vices	Mailing Address								
Principal Place of Business Mailing Address										
PO BOX 5444 HOLLYWOOD FL 33083		PO BOX 5444 HOLLYWOOD FL 33083-54	PO BOX 5444 HOLLYWOOD FL 33083-5444							
							 Date Incorporated or Qualified 11/27/1984 	3a. [oate of Last Re 04/29/199	
2. Principal Place of Business 2a. Mailing Add			ress				4. FEI Number			plied For
21		26]				65-0140297			t Applicable	
Suite, Apt. (#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A Fee Re		
City & State		City & State				6. Election Campaign Financing		\$5.00	<u></u>	
23		28				Trust Fund Contribution		Added to	, , , , , , , , , , , , , , , , , , ,	
Zip	Country	Zip	Countr				8. This corporation has liability for			199.032,
24	25	29	30					Yes	<u></u>	
	9. Name and Address of Curre	ent Registered Agent		81	Name		10. Name and Address of New Re	gisterec	Agent	
PIPI DO	IAAIPT									
FIELDS, JANET 10158 SW 56 STREET				82 Street Add			s (P.O. Box Number is Not Accepta	blo)		
	CITY FL 33328			63						
00012.	. •			84	City	····		FI	85 Zip (Cocle
11. Pursuant t	to the provisions of Sections 617.05	02 and 617.1508, Florida State	itos, the at	DOV6	e-named	d corpora	ation submits this statement for the	purnose	of changing its	s registered
l office or re	egistered agent, or both, in the Stat m familiar with, and accept the oblin	n of Florida. Such change was	authorized	ihw	r the cor	rporation'	's board of directors. I hereby acce	pt the ap	pointment as	registered
SIGNATURE										
	Signature, typod or printed name of registered a	,		d Age	int signaturi	v beriuper er	when reinstating)	DATE	וה הוחבמותם	C IN 40
12.	OFFICERS AND DIRECTORS V		13.	13. 1.1 TITLE P		Ъ	ADDITIONS/CHANGES TO OFFI	UERS AP	DIRECTOR	Addition
NAME	SUNDBERG, A NDY			1.2 NAME 33		15C	in Boddiger		سويسدد وي	CM VIDENTIAN
STREET ADDRESS	AAAAA ODOUG LANG		1.3 STREET AC			716	in Boddiger 51 NW 125Tre	et		
CITY-ST-ZIP	COOPER CITY FL			1.4 CiTY-ST-ZIP		Per	mbroka Pines	FL:	<i>PG0E6</i>	,
TITLE	P			UF	V					Addition
NAME	RICHARD WESTER			22 NAME		Ker	, smith	- A-	·+ 113	
STREET ADDRESS	744 N. W. 42 WAY		2.3 STREET			130	1090 Vista Isle Dr. Apt. 113			
CITY-ST-ZIP	DEERFIELD FL			2. 4 CITY-ST-ZIP		201	nrise FL 332	22	Change	Addition
TITLE			3.1 II 3.2 N						☐ Ollangs	Lag rountyf
NAME STREET ADDRESS	1801 NW 118 AVENUE				ADDRESS					
CITY-ST-ZIP	PLANTATION FL				ST-ZIP					
TITLE	Ď	☐ DELÉTE	4.1 Ti	TLE		1			Change	Addition
NAME	rey, beti		4. 2 N	AME						
STREET ADDRESS	12879 N.W. 101 PLACE		4.3 S	TREFT	ADDRESS					
CITY+ST-ZIP				4.4 C(TY - ST - 7)P 5.3 T(TLE		-			Change	Addition
TITLE	D DELING JANET	☐ DELETE							☐ Change	FT MORROU
NAME CYDEET ADDRESS	FIELDS, JANET 10158 S.W. 56TH ST.		5.2 N		ADDRESS					
STREET ADDRESS CITY-ST-ZIP	COOPER CITY FL				T-ZIP					
TITLE	D	DELETE	6.1 11		41 - 616	†			Change	Addition
NAME	FIELDS, AL		6.2 N							
STREET ADDRESS	10158 S.W. SRTH ST				LADDRESS					

14. I do 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.

6.4 CITY - ST - ZIP