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

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # N14389

(3)

FLORIDA REGION OF THE NATIONAL COUNCIL OF CORVET TE CLUBS. INC.

Principal Place of Business Mailing Address					-{	
51 BEACH AVENUE ATLANTIC BEACH FL 32233		51 BEACH AVENUE ATLANTIC BEACH FL 32233-5257				
US		US		3. Date Incorporated or Qualified 04/14/1986	3a. Date of Last Report 05/14/1996	
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 2011 Mission Valley		26 2011 Mission Valley		59-2777388	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & State  23 Nokomis, FL		City & State 28 Nokomis, FL		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country		Zip Country		8. This corporation has liability for intangible tax under s. 199.032,		
24 34275	25 U.S.	29 34275	30 U.S.	Florida Statutes	Yes No	
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Re	gistered Agent	
			81 Name	Deborah L. Beebe		
PAYNE, CLIFF			82 Street Address (P.O. Box Number is Not Acceptable)			
51 BEACH AVENUE				2011 Mission Valle	y Blvd.	
ATLANTIC	C BEACH FL 32233		83			
			84 City	Nokomis	FL 85 3Zip Code 3 4 2 7 5	
44 Durement 6	a the provinces of Sections 617 860	2 and 617 1508 Florida Statuta	e the above named	corporation submits this statement for the r	urnose of changing its registered	
office or re	egistered agent, or both, in the State	of Florida, Such change was a	uthorized by the corp	poration's board of directors. I hereby accep	of the appointment as registered	
agent. Lar	n familiar with, and accept the obliga-	itions of, Section 617.0503, Flor	rida Statutes.			
SIGNATURE _	Story from providing required as the continued asset	nt and title if applicable. (NOTE	Registered Agent signature	required when reinstating)	Jan. 31, 1997	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		
111LE	D	DELETE	1.1 TITLE	D	Change Addition	
NAME	PAYNE, CLIFF		1.2 NAME	Deborah L. Beebe		
STREET ADDRESS	51 BEACH AVENUE		1.3 STREET ADDRESS	2011 Mission Valle	v Blvd.	
CITY - ST - ZIP	ATLANTIC BEACH FL		1.4 CITY-ST-ZIP	Nokomis, FL 34275	,	
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	Zabkar, Brian		2.2 NAME		•	
STREET ADDRESS	2040 SE 14TH TERR.		2.3 STREET ADORESS			
CITY - ST - ZIF	CAPE CORAL FL	The tre	2. 4 CITY - ST - ZIP		T Alexander	
TILE	D	☐ DELETE	3.1 THILE		Change Addition	
NAME	BEEBE, LARRY		3.2 NAME			
STREET ADDRESS	2011 MISSION VALLEY BLVD.		3.3 STREET ADDRESS	•		
CHY-S1-ZIP TOLE	NOKOMIS FL	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition	
NAME		breete	4. 2 NAME	·		
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP			4.4 CITY-ST-ZIP			
TIFLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
C:1Y - S1 - 7(P			6.4 CITY-ST-ZIP			
inlormatio	n indicated on this annual report or s	supplemental annual report is tra	ue and accurate and ered to execute this r	tated in Section 119.07(3)(i), Florida Statute i that my signature shall have the same lega report as required by Chapter 617, Florida S	il effect as if made under oath: that	

SIGNATURE:

BRIAN ZABKAR

941-574-8178

**FILED** 

Mar 25 1997 8:00am

Secretary of State

1 (2011) DE COLENE DE COLE DE COLENE DE