

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT #
1. Corporation Name

N26320
Vintage Vehicles of Florida, Inc.

900001837869
-05/24/96--01017--017
***61.25

Principal Place of Business

Mailing Address

6045 Oak St.
Scottsboro FL
32775

P.O. Box 952
Titusville, FL
32781

2. Principal Place of Business

2a. Mailing Address

21 6045 Oak St

26 P.O. Box 952

3. Date Incorporated or Qualified
5/6/88

3a. Date of Last Report
8/14/95

4. FEI Number
59-2938208

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

City & State

City & State

23 Scottsboro FL

28 Titusville, FL

Zip

Country

Zip

Country

24 32775

25 Brevard

29 32781

30 Brevard

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

David Smart
6412 Winder Way
Titusville, FL 32780

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE President ☐ DELETE

NAME Dale Ceballos
STREET ADDRESS 6045 Oak Street
CITY-ST-ZIP Scottsboro, FL 32775

TITLE Vice President ☐ DELETE

NAME Roger Ward
STREET ADDRESS 2330 Starlight Dr
CITY-ST-ZIP Titusville, FL 32796

TITLE Treasurer ☐ DELETE

NAME Pam Ward
STREET ADDRESS 7467 Camio Ave
CITY-ST-ZIP Cocoa FL 32927

TITLE Secretary ☐ DELETE

NAME Karen Green
STREET ADDRESS 2529 Pine Ave
CITY-ST-ZIP Mims, FL 32754

TITLE Director ☐ DELETE

NAME Norma Cordova
STREET ADDRESS 20507 Maxem Hwy
CITY-ST-ZIP Orlando, FL 32833

TITLE Director ☐ DELETE

NAME Don Loftis
STREET ADDRESS 3650 N. U.S. 1
CITY-ST-ZIP Mims, FL 32754

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director ☒ Change ☐ Addition

1.2 NAME Jerry Lafreniere
1.3 STREET ADDRESS 4782 Lloyd Rd
1.4 CITY-ST-ZIP Mims, FL 32754

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Pamela Ward, Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/16/96

Date

(407) 636-1441

Daytime Phone #

CR2E037 (12/95)