

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29589

FILED
Jan 22, 2007
Secretary of State

Entity Name: TAMPA BAY ANTIQUE VEHICLE ASSOCIATION, INC.

Current Principal Place of Business:

LUTZ CENTER
100 1ST NW
LUTZ, FL 33549 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1321
LUTZ, FL 33549

New Mailing Address:

FEI Number: 59-2890954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHEWNING, SANDRA
14307 GRAFTON PL
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: CHEWNING, SANDRA
Address: 14307 GRAFTON PL
City-St-Zip: TAMPA, FL 33625

Title: VP () Delete
Name: GARCIA, JOHN
Address: 18945 CROOKED LN
City-St-Zip: LUTZ, FL 33549

Title: S () Delete
Name: GONZALEZ, JOY
Address: 7008 COLLEY RD
City-St-Zip: ODESSA, FL 33556

Title: T () Delete
Name: MOSS, SIDNEY
Address: 6040 COUNTRY CLUB RD
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D () Delete
Name: VANN, GERALD
Address: 2801 ROBERTSON TR
City-St-Zip: LUTZ, FL 33559

Title: D () Delete
Name: COVERT, BRUCE
Address: 18168 SANDY PT DR
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: GERSTNER, JOHN
Address: 11021 ASHBOURNE CIRCLE
City-St-Zip: TAMPA, FL 33624

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CHEWNING, ROGER
Address: 14307 GRAFTON PLACE
City-St-Zip: TAMPA, FL 33625

Title: D (X) Change () Addition
Name: BOURDEAU, ED
Address: 22708 LAURELDALE DRIVE
City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify for the 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: SANDRA M. CHEWNING

P

01/22/2007

Electronic Signature of Signing Officer or Director

Date