

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N43705

**FILED**  
**Jan 12, 2010**  
**Secretary of State**

**Entity Name:** CLASSIC CAMARO OF CENTRAL FLORIDA INC.

**Current Principal Place of Business:**

1779 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703 US

**New Principal Place of Business:**

**Current Mailing Address:**

1779 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703 US

**New Mailing Address:**

**FEI Number:** 59-3023292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KELIHER, JIM  
10532 BAY LAKE ROAD  
GROVELAND, FL 34736 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:** PD  
**Name:** KELLEHER, JIM  
**Address:** 10532 BAY LAKE ROAD  
**City-St-Zip:** GROVELAND, FL 34736

**Title:** VD  
**Name:** NICOLAS, TIM  
**Address:** 13508 CR. LOT 4  
**City-St-Zip:** LADY LAKE, FL 32159

**Title:** DS  
**Name:** FORGUSON, GENE  
**Address:** 202 DOGWOOD DR  
**City-St-Zip:** SANFORD, FL 32159

**Title:** DT  
**Name:** SWOBODZIEN, DOLORES  
**Address:** 1522 BALMY BEACH DR  
**City-St-Zip:** APOPKA, FL 32703

I hereby 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 all other like empowered.

**SIGNATURE:** DOLORES SWOBODZIEN

DT

01/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date