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# Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # **N47910** (7)

1. Corporation Name
SUN 'N FUN VETTES, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 218 S GUNLOCK AVE<br>TAMPA FL 33609 | P.O. BOX 272311<br>TAMPA FL 33688 |

3. Date Incorporated or Qualified: 03/13/1992

4. FEI Number: 59-3112050 ☐ 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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 17319 Simmons Rd | 26 P.O. Box 272311 |
| 22 Suite, Apt. #, etc. | 27 Suite, Apt. #, etc. |
| 23 City & State: Lutz FL | 28 City & State: Tampa FL |
| 24 Zip: 33549 25 Country: Hills. | 29 Zip: 33688 30 Country: Hills |

**9. Name and Address of Current Registered Agent**

NOLAN, JOHN
8520 WOODALL COURT
TAMPA FL 33615

**10. Name and Address of New Registered Agent**

81 Name: Lewis, Rex
82 Street Address (P.O. Box Number is Not Acceptable): 3440 Valley Ranch Dr
83
84 City: Lutz FL 85 Zip Code: 33549

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] - TREASURER K.G. LEWIS 1/16/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DP<br>THYNER, WAYNE<br>2601 TULIP TREE CIR<br>SEFFNER FL | ☒ DELETE | 1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP | DP<br>~~STEVE~~ KLINE, Steve<br>17319 Simmons Rd.<br>Lutz, FL | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DT<br>NOLAN, JOHN<br>8520 WOODALL CT<br>TAMPA FL | ☒ DELETE | 2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP | DT<br>Lewis, Rex<br>3440 Valley Ranch DR.<br>Lutz, FL | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DS<br>SILK, BRUCE<br>2601 CONIFER DR<br>TEMPLE TERR FL | ☐ DELETE | 3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP | DS<br>SILK, BRUCE<br>2601 CONIFER DR<br>TEMPLE TERR, FL | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DV<br>WISSINK, RANDY<br>31531 SADDLE LN<br>ZEPHYRHILLS FL | ☒ DELETE | 4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP | DV<br>Cvetan, DAVID<br>4128 Tyndale Dr.<br>Brandon, FL 33511 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E037 (10/97)

14. I 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.

**SIGNATURE:** SIGNATURE REQUIRED Rex Lewis 1/16/98 (813) 872-0186 (STG)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #