2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 8:00 am
Secretary of State
03-05-2007 90058 018 ****70.00

DOCUMENT # N47910

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

Principal Place of Business	Mailing Address
17319 SIMMONS RD LUTZ, FL 33548 US	P O BOX 272311 TAMPA, FL 33688 US

01182007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3112050 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KLINE, STEVE 17319 SIMMONS RD LUTZ, FL 33549	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25 Due by May 1, 2007 9. Electing Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fee

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD RANAHAN, DEBRA 14112 FENNSBURY DR. TAMPA, FL 33624	☐ Delete			☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ROSE, ROBERT 18503 KINGBIRD DR. LUTZ, FL 33558	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P KELLY, REX 35019 DOLPHIN LAKE DR. ZEPHYRHILLS, FL 33541	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KLINE, STEVE 17319 SIMMONS RD LUTZ, FL 33549	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER /D GLUCK, DAVID 7700 BOUQUET CT. LAND O'LAKES, FL 34637	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ED MCNAIR, JERRY 30332 GLENHAM CT. WESLEY CHAPEL, FL 33543	☐ Delete			☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CARROLL, CAROL 6960 QUAIL HOLLOW BLVD. WESLEY CHAPEL, FL 33544	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LARUE, AUDREY 2437 COLONEL FORD RD. LAKELAND, FL 33813	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete			☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David Gluck DAVID GLUCK, TREASURER 3-1-7 (813)995-2311