

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N93000001557 (8)

1. Corporation Name

MUSTANG & FORD MOTORSPORTS CLUB, INC.

Principal Place of Business

4161 ROLLING SPRINGS DRIVE
TAMPA FL 33624

Mailing Address

P O BOX 274062
TAMPA FL 33688
US



3. Date Incorporated or Qualified
04/06/1993

3a. Date of Last Report
04/20/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3178684

Applied For

Not Applicable

22

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24

29

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

25

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AMES, DEBRA J
4161 ROLLING SPRINGS DRIVE
TAMPA FL 33624

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME PICKENS, GREG ☒ DELETE
STREET ADDRESS 4201 RIVERSIDE DRIVE
CITY-ST-ZIP TAMPA FL

1.1 TITLE President/Director ☐ Change ☒ Addition
1.2 NAME William Kane
1.3 STREET ADDRESS 22336 Dupree Drive
1.4 CITY-ST-ZIP Land O' Lakes, FL 34639

TITLE VD
NAME MANDESE, TIM ☒ DELETE
STREET ADDRESS 613 OVERHILL DR
CITY-ST-ZIP BRANDON FL

2.1 TITLE Vice President/Director ☐ Change ☒ Addition
2.2 NAME Brady Placek
2.3 STREET ADDRESS 608 Oak Moss Drive
2.4 CITY-ST-ZIP Brandon, FL 33511

TITLE SD
NAME GRUND, KIM ☒ DELETE
STREET ADDRESS 2252 VILLAGE COURT
CITY-ST-ZIP BRANDON FL

3.1 TITLE Secretary/Director ☐ Change ☒ Addition
3.2 NAME Katrina Kane
3.3 STREET ADDRESS 22336 Dupree Drive
3.4 CITY-ST-ZIP Land O' Lakes, FL 34639

TITLE TD
NAME PLACEK, BRADY ☒ DELETE
STREET ADDRESS 608 OAK MOSS DR
CITY-ST-ZIP BRANDON FL

4.1 TITLE Treasurer/Director ☐ Change ☒ Addition
4.2 NAME Vivian Blair
4.3 STREET ADDRESS 3511 74th Avenue N.
4.4 CITY-ST-ZIP Pinellas Park, FL 34665

TITLE D
NAME AMES, DEBRA ☐ DELETE
STREET ADDRESS 4161 ROLLING SPRINGS DRIVE
CITY-ST-ZIP TAMPA FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D
NAME AMES, STEVE ☐ DELETE
STREET ADDRESS 4161 ROLLING SPRINGS DR
CITY-ST-ZIP TAMPA FL

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:

Vivian Blair

Vivian Blair, Treas. (813) 576-0312

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)