2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712424

Entity Name: THE MIRACLE STRIP CORVETTE CLUB, INC.

FILED
Jan 21, 2013
Secretary of State
CC6000992092

Current Principal Place of Business:

5590 NORTH W STREET MIRACLE STRIP CORVETTE CLUB ROOM PENSACOLA, FL 32505

Current Mailing Address:

P.O. BOX 10332

PENSACOLA, FL 32524 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, ERNEST G 7032 REDONDO DRIVE PENSACOLA, FL 32526 US

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

Officer/Director Detail:

Title PD, PRESIDENT Title TD, DIRECTOR, TREASURER,

GOVERNOR

Name LEE, RICKIE

Name MARTINEZ, ERNEST G

Address 1203 N. BARCELONA STREET Address 7032 REDONDO DRIVE

City-State-Zip: PENSACOLA FL 32501

City-State-Zip: PENSACOLA FL 32526

Title VD, VP

Name GORDON, RICK Title SD, SECRETARY

Address P.O. BOX 669 KALIVODA, DIANE

Address 6045 N. BLUE ANGEL PARKWAY

City-State-Zip: GULF BREEZE FL 32562

City-State-Zip: PENSACOLA FL 32526

TD

Title OTHER, WEBMASTER

Name MCMAHON, TERE

Address 1820 MUSTANG STREET Name MILLS, CAROL

Address 5360 GALBERRY LANE

City-State-Zip: NAVARRE FL 32566 City-State-Zip: CHI E RREST FL 3256

y-State-Zip: NAVARRE FL 32566 City-State-Zip: GULF BREEZE FL 32563

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.

Electronic Signature of Signing Officer/Director Detail