

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 10 PM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **702512** (5)

1. Corporation Name

ECURIE VITESSE SPORTS CAR CLUB OF KEY WEST, INC.

Principal Place of Business

**3600 N. ROOSEVELT BLVD
KEY WEST FL 33040**

Mailing Address

**3600 N. ROOSEVELT BLVD
KEY WEST FL 33040**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/03/1961

3a. Date of Last Report

03/23/1994

4. FEI Number

NOT APPLICABLE

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**FULLER, JACK
3600 N. ROOSEVELT BLVD
KEY WEST FL 33040**

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, 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

TITLE

D

NAME

HESS, ANDY

STREET ADDRESS

COCONUT HWY N/A

CITY-ST-ZIP

BIG PINE KEY FL 33043

TITLE

D

NAME

HOLLENBECK, STEVE

STREET ADDRESS

%SLOPPY JOES, 209 DUVAL ST.

CITY-ST-ZIP

KEY WEST FL 33040

TITLE

C

NAME

FULLER, NORMAN

STREET ADDRESS

3600 ROOSEVELT BLVD.

CITY-ST-ZIP

KEY WEST FL 33040

TITLE

VC

NAME

MOFIELD, JON

STREET ADDRESS

1013 17TH ST.

CITY-ST-ZIP

KEY WEST FL 33045

TITLE

D

NAME

BRUMWELL, JACK

STREET ADDRESS

1016 18 TERR.

CITY-ST-ZIP

KEY WEST FL 33045

TITLE

S

NAME

BELL, JAMES

STREET ADDRESS

RR1 BOX 483

CITY-ST-ZIP

BIG PINE KEY FL 33043

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Greg Daniels D

3723 Cindy Av

Key West FL 33040

☒ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

D

Steve Hollenbeck

1445 B S. Roosevelt

Key West FL 33040

☒ Change

☐ Addition

(add only)

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Terry Schappell VC

225 Colson Dr.

Summerland Key FL 33042

☒ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Tina Brumwell D

1016 18 Terr.

Key West FL 33045

☒ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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 110.07(3)(d), 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:

James W. Bell James W. Bell

2/15/95

(305) 873-2237

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #