2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2010
Secretary of State

DOCUMENT# 712392

Entity Name: NORTH FLORIDA CORVETTE ASSOCIATION, INCORPORATED

Current Principal Place of Business:

8281 MERRILL RD.
JACKSONVILLE, FL 32277 US

New Principal Place of Business:

10880 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32256 US

Current Mailing Address:

3750 BEAUCLERC ROAD
JACKSONVILLE, FL 32257 US

New Mailing Address:

FEI Number: 59-2950338 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCORMICK, ROBERT L
3750 BEAUCLERC ROAD
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: OS
Name: MCCORMICK, ROBERT L
Address: 3750 BEAUCLERC RD
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: OG
Name: MONTGOMERY, MANNY
Address: 12313 CARON DR.
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: OP
Name: WAY, HARRY
Address: 5041 AZURE ST
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: OVP
Name: ANDERSON, TIM
Address: 4576 WILDERNESS CT.
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: OT
Name: ANDERSON, BARBARA
Address: 4576 WILDERNESS CT
City-St-Zip: JACKSONVILLE, FL 32258 US

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.

SIGNATURE: ROBERT L. MCCORMICK OS 01/06/2010
Electronic Signature of Signing Officer or Director Date