

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719698

FILED  
Jan 15, 2008  
Secretary of State

Entity Name: CENTRAL FLORIDA CRUISERS, INC.

## Current Principal Place of Business:

36846 STATE ROAD 19  
UMATILLA, FL 32784 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 937  
EUSTIS, FL 32727 US

## New Mailing Address:

FEI Number: 59-1800318

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCNICOL, RONALD TRES  
1675 SHADY LANE  
GRAND ISLAND, FL 32735 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: PRES ( ) Delete  
Name: CASE, GREGORY P PRES  
Address: 30805 DEAL DRIVE  
City-St-Zip: SORRENTO, FL 32776 US

Title: VP ( ) Delete  
Name: LEMONOVICH, THOM VP  
Address: 1801 LAKE EUSTIS DRIVE  
City-St-Zip: EUSTIS, FL 32726 US

Title: TRES ( ) Delete  
Name: MCNICOL, RONALD TRES  
Address: 1675 SHADY LANE  
City-St-Zip: GRAND ISLAND, FL 32735 US

Title: SEC ( ) Delete  
Name: BLANCHARD, KEITH SEC  
Address: 35244 COUNTY ROAD 439  
City-St-Zip: EUSTIS, FL 32736 US

Title: DIR ( ) Delete  
Name: JONES, LOGAN DIR  
Address: 2346 ALICE AVENUE  
City-St-Zip: EUSTIS, FL 32726 US

Title: DIR ( ) Delete  
Name: PALMER, HUGH DIR  
Address: P.O. BOX 2187  
City-St-Zip: WINTER PARK, FL 32790 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SEC (X) Change ( ) Addition  
Name: KATHIE, WINNER SEC  
Address: 128 NORTH LAKE DRIVE  
City-St-Zip: LEESBURG, FL 34788 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RONALD MCNICOL

TREA

01/15/2008

Electronic Signature of Signing Officer or Director

Date