2008 NOT-FOR-PROFIT CORPORATION

FILED Feb 04, 2008 8:00 am Secretary of State 02-04-2008 90031 040 ****70.00

ANNUAL REPORT									
DOCUMENT # 726689									
Entity Name CENTRAL FLORIDA CORVETTE ASSOCIATION INC									

Principal Plac 2915 LAKE / ORLANDO, F	ARNOLD PL		Mailing Address 2915 LAKE ARNOLD PL ORLANDO, FL 32806			I KURN KERTI IKKIR KAN HUDU BERJI AIKII	F(D)) F(C)) 311		
Principal Place of Business - No P.O. Box # 3. Mailing Address			-						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			01172008 C	hg-NP CR2E037	(12/06)		
City & State		City & State			4. FEI Number 23-743082	26	· · · · · ·	oplied For	
Zip	Zip Country Zip		Cou	intry	5. Certificate of S	tatus Desired X F	B.75 Ada	ditional	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
GARDNER, PATRICIA K				Name					
2915 LAKE	E ARNOLD PL.		Street Address		Address (P.O. Box Number is	(P.O. Box Number is Not Acceptable)			
ORLANDO), FL 32806								
				City		FL	Zip Cod	e	
8. The above the obligat	named entity submits this statement fo ions of registered agent.	r the purpose of changing it	s registere	L ed office o	or registered agent, or both, in	the State of Florida. I am fai	I miliar with,	and accep	
	Signature, typed or printed name of registered agont	and title if applicable. (NO	TE: Registere	d Agent signa	ture required when reinstating)	DATE			
Filing Fee is \$61.25 Due by May 1, 2008 9. Election Carn Trust Fund Co									
10.	OFFICERS AND DIF	RECTORS	11.		ADDITIONS/CHANG	LES TO OFFICERS AND DIRE	CTORS IN	l 10	
TITLE	PD	Delete	TITLE		PD		Change	☐ Additi	
NAME STREET ADDRESS	COLE, JACOB K 8665 HILLSIDE DR		NAMI	e Et address	ASHE, DUNALD 1670 TALLADOOSA	x a			
CITY-ST-ZIP	ORLANDO, FL 32810			-ST-ZIP	GENEVA, FL 3				
TITLE	VD	Delete	nne		VD		Change	☐ Additio	
NAME	MCKEY, ROBERT		NAM		COLE, JACOB K		_ •	_	
STREET ADDRESS CITY-ST-ZIP	1110 WINEBERRY COURT OCOEE, FL 34761			et address -st-zip	ORLANDO, FL 32				
TITLE	SD SD	Delete	TITLE		DICE THE DE		☐ Change	☐ Additio	
NAME	WINN, BECKY	LI Deserte	NAMI			ι	Criange	[_] Augitii	
STREET ADDRESS	839 SUTTER LOOP		STRE	et adoress					
CITY-ST-ZSP	LONGWOOD, FL 32750		CITY	-ST-ZIP					
TITLE	TD GARDNER, PATRICIA	☐ Delete	title			[Change	Addition	
NAME STREET ADDRESS	2915 LK ARNOLD PL		NAMI Stre	ET ADDRESS					
CITY-ST-ZIP	ORLANDO, FL 32806			-ST-ZIP					
TIRE	D	Delete	TITLE		D	<u> </u>	Change	☐ Additio	
NAME	HUTCHINSON, JOHN		NAMI		BOSWELL, GREEK				
STREET ADDRESS City-St-Zip	13644 CRYSTAL RIVER ORLANDO, FL 32828			et address -st-zip	203 COLONALL				
TITLE	D	□ Delete	TITLE		LONEWOOD, FL 3		Change	☐ Additio	
NAME	MCCOY, MARSHA	LI Desete	NAMI			L	_i ∧irqiige		
STREET ADDRESS	2441 CERBERUS DRIVE			ET ADDRESS					
CITY-ST-ZIP	APOPKA, FL 32712		CITY	-ST-ZIP					
12 I harahy c	sartify that the information conclined with	this filing does not avalify for	ar the eve		antained in Obserter 440. El-	data Caracara at the constitution	al . I al		

I nereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 i changed, or on an attachment with an address, with all other like empowered.

DATELLIA K GAP MALO 1-20-00 1002 0011-2020