

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 738718

FILED
Nov 02, 2005
Secretary of State

Entity Name: TITUSVILLE CORVETTE CLUB, INC.

Current Principal Place of Business:

3947 MONTESINO DRIVE
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 725
TITUSVILLE, FL 327810725 US

New Mailing Address:

FEI Number: 59-1743414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRISSOM, TOBY
3947 MONTESINO DRIVE
ROCKLEDGE, FL 32955 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: TOBY GRISSOM

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRISSOM, TOBY
Address: 3947 MONTESINO DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: VD () Delete
Name: MCCOY, MARSHA
Address: 6990 BRYANT ROAD
City-St-Zip: COCOA, FL 32927

Title: TD () Delete
Name: PARKER, YVONNE
Address: 4005 GROVEWOOD LANE
City-St-Zip: TITUSVILLE, FL 32780

Title: SD () Delete
Name: MARCELLA, GAY
Address: 463 GUAVA AVE
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: HARRIS, JESSE
Address: 7265 WINDOVER WAY
City-St-Zip: TITUSVILLE, FL 32780

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TREASURER/ JESSE HARRIS

TD

11/02/2005

Electronic Signature of Signing Officer or Director

Date