

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 07, 2006 8:00 am**  
**Secretary of State**

04-07-2006 90023 005 \*\*\*\*61.25

**DOCUMENT # 738718**

1. Entity Name  
**TITUSVILLE CORVETTE CLUB, INC.**



Principal Place of Business  
**3947 MONTESINO DRIVE  
ROCKLEDGE, FL 32955 US**

Mailing Address  
**P. O. BOX 725  
TITUSVILLE, FL 32781-0725 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03072006

Chg-NP

CR2E037 (11/05)

4. FEI Number  
**59-1743414**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

*3/7/06*

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME GRISSOM, TOBY  
STREET ADDRESS 3947 MONTESINO DR  
CITY-ST-ZIP ROCKLEDGE, FL 32955

TITLE VD ☒ Delete  
NAME MCCOY, MARSHA  
STREET ADDRESS 6990 BRYANT ROAD  
CITY-ST-ZIP COCOA, FL 32927

TITLE TD ☐ Delete  
NAME HARRIS, JESSE  
STREET ADDRESS 7265 WINDOVER WAY  
CITY-ST-ZIP TITUSVILLE, FL 32780

TITLE SD ☐ Delete  
NAME MARCELLA, GAY  
STREET ADDRESS 463 GUAVA AVE  
CITY-ST-ZIP TITUSVILLE, FL 32796

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME GAY, MARCELLA  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*

Jesse L. Harris

3/7/06

Date

321 861 6733

Daytime Phone #