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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 746265

1. Corporation Name

**MERCEDES-BENZ CLUB OF AMERICA, INC. TAMPA BAY SE
CTION**

Principal Place of Business

NORMAN STUCK
1658 S. HILLCREST AVE
CLEARWATER FL 34616
US

Mailing Address

NORMAN STUCK
1658 S. HILLCREST AVE
CLEARWATER FL 34616
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

3. Date incorporated or Qualified

03/16/1979

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

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

9. Name and Address of Current Registered Agent

STUCK, NORMAN
1658 S. HILLCREST AVE.
CLEARWATER FL 34616

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Norman Stuck

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

(NOTE: Registered Agent signature required when reinstating)

1-20-99

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE
NAME **HOWARD, ROGERS M**
STREET ADDRESS **4144 PERRY PL**
CITY-ST-ZIP **NEW PORT RICHEY FL**

TITLE **TD** ☒ DELETE
NAME **STUCK, NORMAN**
STREET ADDRESS **1658 S. HILLCREST AVE.**
CITY-ST-ZIP **CLEARWATER FL**

TITLE **SD** ☒ DELETE
NAME **CLOUS, CARL J**
STREET ADDRESS **4125 PARK N.**
CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE **VD** ☒ DELETE
NAME **WATSON, RON**
STREET ADDRESS **5327 DENVER N.E.**
CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **CAROLYN SUITS**
1.3 STREET ADDRESS **795 CR # 1 LOT 205**
1.4 CITY-ST-ZIP **PALM HARBOR, FL 34683**

2.1 TITLE **VD** ☒ Change ☐ Addition
2.2 NAME **BONNIE WOLVERTON**
2.3 STREET ADDRESS **220 DRIETWOOD Rd SE**
2.4 CITY-ST-ZIP **ST. PETERSBURG, FL. 33705**

3.1 TITLE **SD** ☒ Change ☐ Addition
3.2 NAME **HOWARD ROGERS**
3.3 STREET ADDRESS **4144 PERRY PL.**
3.4 CITY-ST-ZIP **NEW PORT RICHEY, FL 34652**

4.1 TITLE **TD** ☒ Change ☐ Addition
4.2 NAME **NORMAN STUCK**
4.3 STREET ADDRESS **1658 S. HILLCREST AVE**
4.4 CITY-ST-ZIP **CLEARWATER, FL 33756**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Norman Stuck

1-20-99

727-461-2365

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)