

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746716

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Entity Name:** SUNSHINE CORVETTE CLUB, INC.

**Current Principal Place of Business:**

449 PAYNE DR  
MIAMI SPRINGS, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

449 PAYNE DR  
MIAMI SPRINGS, FL 33166

**New Mailing Address:**

**FEI Number:** 59-1973157

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAYLOR, TOM  
449 PAYNE DR  
MIAMI SPRINGS, FL 33166 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: VD  
Name: JACOBS, FRANK  
Address: 8510 SW 91 CT  
City-St-Zip: MIAMI, FL 33173

Title: PD  
Name: GOLDSMITH, BERTREM  
Address: 13065 NEVADA SR  
City-St-Zip: CORAL GABLES, FL 33130

Title: SD  
Name: LAURI, ANTHONY  
Address: 5330 NW 189 ST  
City-St-Zip: MIAMI, FL 33055

Title: D  
Name: TAYLOR, TOM  
Address: 449 PAYNE DR  
City-St-Zip: MIAMI SPRINGS, FL

Title: TD  
Name: GONZALEZ, ALEX  
Address: 15103 SW 148 CT  
City-St-Zip: MIAMI, FL 33196

I hereby 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 all other like empowered.

SIGNATURE: TOM TAYLOR

D

01/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date