

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751443

FILED  
Feb 20, 2009  
Secretary of State

**Entity Name:** MERCEDES-BENZ CLUB OF AMERICA, ROAD STAR SECTION, INC.

**Current Principal Place of Business:**

22159 PALMS WAY  
SUITE 106  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

22159 PALMS WAY  
SUITE 106  
BOCA RATON, FL 33433

**New Mailing Address:**

**FEI Number:** 65-0074825

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FINKEL, MAURICE  
22159 PALMS WAY  
SUITE 106  
BOCA RATON, FL 33433 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: PD ( ) Delete  
Name: FINKEL, MAURICE  
Address: 22159 PALMS WAY, APT. 106  
City-St-Zip: BOCA RATON, FL 33433

Title: T ( ) Delete  
Name: DELUCA, MARCIA  
Address: 5331 NW 32 COURT  
City-St-Zip: MARGATE, FL 33063

Title: VP (X) Delete  
Name: RODECKI, PAUL  
Address: 2740 SW MARTIN DOWNS BLVD. 304  
City-St-Zip: PALM CITY, FL 34990

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: RODECKI, PAUL  
Address: 2740 SW MARTIN DOWNS BLVD, PMB 304  
City-St-Zip: PALM CITY, FL 34990 US

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PAUL RODECKI

VP

02/20/2009

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

\_\_\_\_\_  
Date