

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 02, 2007
Secretary of State

DOCUMENT# 770870

Entity Name: VOITURE LOCAL #294, INC.

Current Principal Place of Business:5926 PARK RIDGE CIRCLE
PORT ORANGE, FL 32127**New Principal Place of Business:****Current Mailing Address:**5926 PARK RIDGE CIRCLE
PORT ORANGE, FL 32127**New Mailing Address:**

FEI Number: 59-6178148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:GUGLIELMO, GEORGE
5926 PARK RIDGE CIRCLE
PORT ORANGE, FL 32127 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: P () Delete
Name: WILSON, LARRY
Address: 255 OAK LANE
City-St-Zip: NEW SMYRNA BEACH, FL 32168Title: VP () Delete
Name: QUARLES, THOMAS
Address: 746 GREENFIELD DR
City-St-Zip: PORT ORANGE, FL 32127Title: S/T () Delete
Name: GUGLIELMO, GEORGE
Address: 5926 PARK RIDGE CIR
City-St-Zip: PT ORANGE, FL 32127Title: D () Delete
Name: QUARTIER, DONALD
Address: 2020 ORIOLE DR
City-St-Zip: PORT ORANGE, FL 32129Title: D () Delete
Name: RYAN, JOHN
Address: 959 SAND CREST DR
City-St-Zip: PORT ORANGE, FL 32127**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: QUARLES, THOMAS
Address: 746 GREENFIELD DR.
City-St-Zip: PORT ORANGE, FL 32127Title: VP (X) Change () Addition
Name: GUGLIELMO, GEORGE
Address: 5926 PARK RIDGE CIRCLE
City-St-Zip: PORT ORANGE, FL 32127Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip: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: GEORGE GUGLIELMO

S/T

07/02/2007

Electronic Signature of Signing Officer or Director

Date