

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 26 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 830807 (4)

1. Corporation Name

MOTOR CLUB OF AMERICA ENTERPRISES, INC.

Principal Place of Business

**484 CENTRAL AVE
NEWARK NJ 07107**

Mailing Address

**484 CENTRAL AVE
NEWARK NJ 07107**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/10/1973

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

4. FEI Number

23-7012887

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

6. This corporation has liability for intangible tax under G. 189.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the # applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

CD

NAME

MCWHORTER, ARCHER

STREET ADDRESS

484 CENTRAL AVE

CITY - ST - ZIP

NEWARK NJ

TITLE

PD

NAME

GILBERT, STEPHEN

STREET ADDRESS

484 CENTRAL AVE

CITY - ST - ZIP

NEWARK NJ

TITLE

S

NAME

BARBANO, PETER K.

STREET ADDRESS

484 CENTRAL AVE

CITY - ST - ZIP

NEWARK, NJ 07000

TITLE

V

NAME

FASTIGGI, THOMAS

STREET ADDRESS

484 CENTRAL AVE

CITY - ST - ZIP

NEWARK NJ

TITLE

V

NAME

VIOLETTE, PETER

STREET ADDRESS

484 CENTRAL AVE

CITY - ST - ZIP

NEWARK NJ

TITLE

V

NAME

MEYERS, GEORGE

STREET ADDRESS

484 CENTRAL AVE

CITY - ST - ZIP

NEWARK NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

V/D

☒ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

Patrick J. Haveron

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Stephen A. Gilbert, President

April 17, 1995 (201) 733-1234