

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L86218

FILED
Apr 03, 2009
Secretary of State

Entity Name: TRANSTATE MOTOR CLUB, INC.

Current Principal Place of Business:

830 N.W. 13TH STREET
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

830 N.W. 13TH STREET
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 59-3015550

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAZY, CAROL M
830 N.W. 13TH STREET
GAINESVILLE, FL 32601 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HAZY, VICTOR
Address: 830 NW 13TH STREET
City-St-Zip: GAINESVILLE, FL

Title: VP () Delete
Name: ENLOW, LOWELL M
Address: 1210 S. WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32780

Title: VP () Delete
Name: MALONE, JAMES
Address: 1907 BLANDING BLVD.
City-St-Zip: JACKSONVILLE, FL

Title: VP () Delete
Name: SMITH, STEPHEN M
Address: 566 INTERNATIONAL SPEEDWAY BLVD.
City-St-Zip: DAYTONA BEACH, FL 32014

Title: VP () Delete
Name: DOBRY, HAL R
Address: 10 MARTINIQUE COVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP () Delete
Name: LUCAS, STEVEN W
Address: 214 TIMBERCOVE CIRCLE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICTOR HAZY, JR.

PRES

04/03/2009

Electronic Signature of Signing Officer or Director

Date