

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005409

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** INTERNATIONAL HARVESTER COLLECTORS CLUB, FLORIDA CHAPTER 27, INC

**Current Principal Place of Business:**

% TIM WHEATON  
7000 AVON PARK CUT-OFF RD  
FORT MEADE, FL 33841

**New Principal Place of Business:**

**Current Mailing Address:**

% TIM WHEATON  
206 PINEHILL LANE  
SEBRING, FL 33876

**New Mailing Address:**

**FEI Number:** 59-3664198      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

WHEATON, TIMOTHY  
206 PINEHILL LANE  
SEBRING, FL 33876      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: HICKS, JIM  
Address: 1200 LUCERWE LOOP RD  
City-St-Zip: WINTER HAVEN, FL 33881

Title: DT      ( ) Delete  
Name: WHEATON, TIMOTHY  
Address: 206 PINEHILL LANE  
City-St-Zip: SEBRING, FL 33876

Title: DS      ( ) Delete  
Name: SANDY, EVELYN  
Address: 3708 MULLER DR  
City-St-Zip: ZEPHYRHILLS, FL 335406563

Title: D      ( ) Delete  
Name: TURNER, JAMES M  
Address: 1985 APACHE CT  
City-St-Zip: TITUSVILLE, FL 32796

Title: DV      ( ) Delete  
Name: BUTTERFIELD, JOHN  
Address: 501 PEACOCK RD  
City-St-Zip: HOLLY HILL, FL 32117

Title: D      ( ) Delete  
Name: STEVENSON, CHARLES  
Address: 4800 TIGER LANE  
City-St-Zip: MIMS, FL 32754

**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:

Title:      ( ) 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: TIMOTHY WHEATON

TREA

05/01/2009

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

\_\_\_\_\_  
Date