

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2004 8:00 am
Secretary of State

02-27-2004 90017 028 ****61.25

DOCUMENT # N01000008747

1. Entity Name

MID FLORIDA ALFA ROMEO OWNERS CLUB, INC.



Principal Place of Business

225 SHADOW BAY BLVD S
LONGWOOD FL 32779

Mailing Address

225 SHADOW BAY BLVD S
LONGWOOD FL 32779

34016016



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

30-0038880

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERNSTEIN, HOWARD
225 SHADOW BAY BLVD S
LONGWOOD FL 32779

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME BERNSTEIN, HOWARD
STREET ADDRESS 225 SHADOW BAY BLVD S
CITY-ST-ZIP LONGWOOD FL 32779

TITLE D ☒ Delete
NAME MAY, BARBARA J
STREET ADDRESS 4172 PLAYERS CIR
CITY-ST-ZIP ORLANDO FL 32808

TITLE D ☐ Delete
NAME MILLER, MARGO
STREET ADDRESS 679 SILVER CREEK DR
CITY-ST-ZIP WINTER SPRINGS FL 32708

TITLE D ☐ Delete
NAME RICHER, DAN
STREET ADDRESS 635 MANDERLEY RUN
CITY-ST-ZIP LAKE MARY FL 32746

TITLE D ☐ Delete
NAME MILLER, ROBERT
STREET ADDRESS 679 SILVER CREEK DR
CITY-ST-ZIP WINTER SPRINGS FL 32708-3142

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME Robert Theodore
STREET ADDRESS 9501 Kilgore Rd.
CITY-ST-ZIP Orlando, FL 32836

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Howard Bernstein* PRES HOWARD BERNSTEIN 2/23/04 774-7947
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #