

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 29, 2008 8:00 am
Secretary of State

08-29-2008 90002 048 ****61.25

DOCUMENT # N02000000593					
1. Entity Name SOUTH FLORIDA MIATA CLUB INC.					
Principal Place of Business 1748 NW 82 AVE. CORAL SPRINGS, FL 33071			Mailing Address 1748 NW 82 AVE. CORAL SPRINGS, FL 33071		
2. Principal Place of Business - No P.O. Box # 4481 TREASURE COVE DR.		3. Mailing Address Suite, Apt. #, etc.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State DANIA BEACH, FL		City & State		4. FEI Number NOT APPLICABLE	
Zip 33312		Country BROWARD		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GLINIECKI, THOMAS S 1748 NW 82 AVE. CORAL SPRINGS, FL 33071			7. Name and Address of New Registered Agent Name: FISCHER, ELI R. Street Address (P.O. Box Number is Not Acceptable): 4481 TREASURE COVE DRIVE City: DANIA BEACH FL Zip Code: 33312		
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: <u>Eli R Fischer</u> DATE: <u>8/26/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE P NAME GLINIECKI, THOMAS S STREET ADDRESS 1748 NW 82 AVE. CITY-ST-ZIP CORAL SPRINGS, FL 33071	<input type="checkbox"/> Delete		TITLE P NAME FISCHER, ELI R STREET ADDRESS 4481 TREASURE COVE DRIVE CITY-ST-ZIP DANIA BEACH, FL 33312	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE V NAME FISCHER, ELI R STREET ADDRESS 4481 TREASURE COVE DR. CITY-ST-ZIP DANIA BEACH, FL 33312	<input type="checkbox"/> Delete		TITLE V NAME JEAN FISCHER STREET ADDRESS 4481 TREASURE COVE DRIVE CITY-ST-ZIP DANIA BEACH, FL 33312	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE S NAME FISCHER, JEAN STREET ADDRESS 4481 TREASURE COVE DR. CITY-ST-ZIP DANIA BEACH, FL 33312	<input type="checkbox"/> Delete		TITLE S NAME LARRY FISCHER STREET ADDRESS 4481 TREASURE COVE DRIVE CITY-ST-ZIP DANIA BEACH, FL 33312	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE T NAME GLINIECKI, PAMELA STREET ADDRESS 1748 NW 82 AVE. CITY-ST-ZIP CORAL SPRINGS, FL 33071	<input type="checkbox"/> Delete		TITLE S NAME LARRY FISCHER STREET ADDRESS 4481 TREASURE COVE DRIVE CITY-ST-ZIP DANIA BEACH, FL 33312	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Eli R Fischer</u> <u>Eli R. Fischer</u>			Date: <u>8/26/08</u> Daytime Phone #: <u>305-389-2494</u>		