2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 17, 2005 8:00 am
Secretary of State
05-02-2005 90432 012 ****61.25

DOCUMENT # N03000000173

1. Entity Name
FLORIDA FOUR WHEEL DRIVE ASSOCIATION, INC.

66023331

Principal Place of Business	Mailing Address
5301 SOUTH US HIGHWAY 17-92 CASSELBERRY, FL 32707	5301 SOUTH US HIGHWAY 17-92 CASSELBERRY, FL 32707

04292005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
1568 ARBOR LANE Suite, Apt. #, etc.	1568 ARBOR LANE Suite, Apt. #, etc.
City & State: FERNANDINA Beach FL	City & State: FERNANDINA Beach FL
Zip: 32034 Country: US	Zip: 32034 Country: US

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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
KUFTIC, MICHAEL 669 S.W. NICHOLS TER PORT ST. LUCIE, FL 34953	Name: Jennifer Hawkins Street Address (P.O. Box Number is Not Acceptable): 1568 ARBOR Lane City: FERNANDINA Beach FL Zip Code: 32034

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: Jennifer S Hawkins Jennifer S Hawkins 4-26-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WOO, RAY 10306 SW 21 AVE. GAINESVILLE, FL 32607	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President SCOTT Brinkley 2319 Fieldingwood Road MAITLAND, FL 32751	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V QUILLIN, TOM 440 CAPRI WAY NE SAINT PETERSBURG, FL 33704	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE-PRESIDENT MICHAEL ENZOR 1158 S Cooper Dr DELTONA, FL 32725	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T KUFTIC, MICHAEL 669 S.W. NICHOLS TERR PORT ST. LUCIE, FL 34953	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER JENNIFER HAWKINS 1568 ARBOR LANE FERNANDINA BEACH, FL 32034	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR RUSSELL M HAWKINS 1568 ARBOR LANE FERNANDINA BEACH, FL 32034	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Jennifer S Hawkins Jennifer S. Hawkins 4-26-05 904 261 0292
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #