

FILED N03000000963

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

3/26

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
66008338

DOCUMENT # N03000000963					
1. Entity Name FERRARI OWNERS CLUB - FLORIDA REGION, INC.					
Principal Place of Business 6710 TANGLEWOOD DRIVE N.E. ST. PETERSBURG, FL 33702 US			Mailing Address 6710 TANGLEWOOD DRIVE N.E. ST. PETERSBURG, FL 33702 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 01-0573318	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent REINECKE, MARK E 6710 TANGLEWOOD DRIVE N.E. ST. PETERSBURG, FL 33702				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				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 reappointing)					
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution ☐		10. \$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	REINECKE, MARK K.	☐ Delete	TITLE	S
NAME		REINECKE, MARK K.		NAME	Bryce Morehead
STREET ADDRESS		6710 TANGLEWOOD DRIVE N.E.		STREET ADDRESS	3405 West Kirby Street
CITY - ST - ZIP		ST. PETERSBURG, FL 33702		CITY - ST - ZIP	Tampa, FL 33614-3367
TITLE	V	ROBERTS, GARY	☐ Delete	TITLE	D
NAME		ROBERTS, GARY		NAME	Charles Lee Adams
STREET ADDRESS		7093 SOUTH TAMiami TRAIL		STREET ADDRESS	7314 Birds Nest Ct.
CITY - ST - ZIP		SARASOTA, FL 34231		CITY - ST - ZIP	Yalaha, FL 34797
TITLE	S	FLANKEY, KEVIN	☒ Delete	TITLE	
NAME		FLANKEY, KEVIN		NAME	
STREET ADDRESS		711 RIDGEWOOD STREET		STREET ADDRESS	
CITY - ST - ZIP		ORLANDO, FL 32803		CITY - ST - ZIP	
TITLE	T	REINECKE, PAMELA	☐ Delete	TITLE	
NAME		REINECKE, PAMELA		NAME	
STREET ADDRESS		6710 TANGLEWOOD DRIVE N.E.		STREET ADDRESS	
CITY - ST - ZIP		ST. PETERSBURG, FL 33702		CITY - ST - ZIP	
TITLE	D	MILLER, ARTHUR	☐ Delete	TITLE	
NAME		MILLER, ARTHUR		NAME	
STREET ADDRESS		13627 DEERING BAY DRIVE		STREET ADDRESS	
CITY - ST - ZIP		CORAL GABLES, FL 33158		CITY - ST - ZIP	
TITLE			☐ Delete	TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
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 fee empowered.					
SIGNATURE: <u>Mark E. Reinecke</u>			3-19-2007 727-525-1901		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE		