2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000008121

1. Entity Name
FLORIDA ANTIQUE TRACTOR CLUB, INC.

Principal Place of Business	Mailing Address
5749 RIDDLE RD HOLIDAY, FL 34690	5749 RIDDLE RD HOLIDAY, FL 34690

DO NOT WRITE IN THIS SPACE

01292008 No Chg-NP   CR2E037 (4/06)

4. FEI Number	Applied For
20-0927797	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

Beiter
~~BRITER~~, SANDRA SD
5749 RIDDLE RD
HOLIDAY, FL 34690

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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 _Sandra M Beiter, Secretary_   2/01/08

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, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

U000000880318
04/15/08-80057-001 61.25

10.   OFFICERS AND DIRECTORS

TITLE	DT
NAME	PAULHAMMUS, FRANK
STREET ADDRESS	1950 N COUNTRY RD
CITY-ST-ZIP	EUSTIS, FL 32726
TITLE	PD
NAME	WALLER, ROB
STREET ADDRESS	40217 EMARELDA ISLAND RD
CITY-ST-ZIP	LEESBURG, FL 33478
TITLE	SD
NAME	BEITER, SANDRA
STREET ADDRESS	5749 RIDDLE RD
CITY-ST-ZIP	HOLIDAY, FL 34690
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _Sandra M Beiter_   2/01/08   (727) 576 -6311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #