

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03311

FILED  
Jan 03, 2008  
Secretary of State

**Entity Name:** TREASURE COASTERS REPEATER ASSOCIATION, INC.

**Current Principal Place of Business:**

240 29TH COURT SW  
VERO BEACH, FL 32968 US

**New Principal Place of Business:**

**Current Mailing Address:**

1590 46TH AVENUE  
VERO BEACH, FL 32966 US

**New Mailing Address:**

**FEI Number:** 59-2413858

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BAKER, C. DWIGHT  
1590 46TH AVENUE  
VERO BEACH, FL 32966 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: S/TD ( ) Delete  
Name: JACKSON, RICHARD  
Address: 240 29TH COURT SW  
City-St-Zip: VERO BEACH, FL 32968

Title: D ( ) Delete  
Name: BAKER, C. DWIGHT  
Address: 1590 46TH AVENUE  
City-St-Zip: VERO BEACH, FL 32966

Title: D ( ) Delete  
Name: SMITH, ALFRED  
Address: 1425 14TH COURT  
City-St-Zip: VERO BEACH, FL 32960

Title: PD ( ) Delete  
Name: STEWART, CRAIG  
Address: 646 GLENVIEW TERRACE  
City-St-Zip: VERO BEACH, FL 32962

Title: VD ( ) Delete  
Name: NOVOTNY, JOHN J  
Address: 163 FREEPORT CAY  
City-St-Zip: VERO BEACH, FL 32966

Title: D ( ) Delete  
Name: LIMBERIS, NICHOLAS M  
Address: 1526 48TH COURT  
City-St-Zip: VERO BEACH, FL 32966

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C.

DIR

01/03/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date