## **2008 NOT-FOR-PROFIT CORPORATION**

## **ANNUAL REPORT**

## **FILED** Apr 16, 2008 8:00 am Secretary of State

04-16-2008 90016 020 \*\*\*\*61.25

DOCUMENT # N0400003945\_ 1. Entity Name

SUNCOA	AST BRITISH CAR CLUB, IN							
Principal Place of Business 1703 NORTH DR. SARASOTA, FL 34239		Mailing Address 1703 NORTH DR. SARASOTA, FL 34239		, guua	ENAS300T			
3 Principal P	Near of Divisions No DO Day 4	A Madison Address						
2. Principal Place of Business - No P.O. Box # 4134 OSPREY HARBOUR LOOP Suite, Apt. #, etc.		3. Mailing Address 9 4134 OSAREY HARBOUR LOOP Suite, Apt. #, etc.		1 04040000	ng-NP CR2E03	III IIII IIII)    III  -7 (12/06)		
City & State  LORTEZ, FL		City & State ORTEZ, FL		4. FEI Number NOT APPLI	4. FEI Number Applied For NOT APPLICABLE Not Applicable			
2ip 34215 Country USA		<sup>zip</sup> 34215	34215 USA		5. Certificate of Status Desired			
	6. Name and Address of Current	Registered Agent	Name	7. Name and Add	ress of New Registered A	gent		
	TH DRIVE		Name JOYCE Street Addre	Address (P.O. Box Number is Not Acceptable)				
SARASUI	Ā, FL 34239		4134 OSPREY HARBOUR LOOP					
			City Co,	RTEZ	FL	Zip Code	415	
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 aport and title of applicable. (MOTE Registered Aport signature required when remaining)  DATE								
	Filing Fee is \$61.25 Due by May 1, 2008	\$5.00 May Be Added to Fees	Make check Florida Depart					
10.	OFFICERS AND DIF	RECTORS	<b>I</b> 11.		S TO OFFICERS AND DIR			
MLE	VP .	Delete	TIDE V	$\rho$		Change	Addition	
NAME	NIEDOSPOAL, BRYANT		NAME A	LEXANDER,	BARRY	مور مارس		
-STREET ADDRESS City-St-Zip	1393 GEORGETOWN CIRCLE SARASOTA, FL 34232		STREET ADDRESS / 7	ON NORTH	DRIVE	1730		
TITLE	S S S S S S S S S S S S S S S S S S S			ARASOTA,		1239	<b>53.115</b>	
NAME	WILSON, DEBBIE	☐ Delete	NAME Z	OBAN, MES O. BOX ZZ		Change	☐ Addition	
STREET ADDRESS	1621 JACANA CT		STREET ADDRESS ${\cal P}$	O. BOX ZZ	9	. ,		
CITY-ST-ZIP	NOKOMIS, FL 34275		CITY-ST-ZIP 7	ERRA CEI	1, FL 3	1425C	<b>-</b>	
TITLE NAME	T PEARCE, NICK	Delete	NAME T	PEITH, JOYCE		Change	Addition	
STREET ADDRESS	1703 NORTH DR.		STREET ADDRESS LL/	34 OSPREY	MARBOUR			
CITY-ST-ZIP	SARASOTA, FL 34239			ORTEZ, FI	1. 34215			
MILE	P DAVE	Delete	ITTLE 7	, ,	BRYANT GETOWN C FL: 34	(Change	☐ Addition	
name Street address	HASLER, DAVE 12117 CLUB HOUSE DE		NAME  STREET ADDRESS /,=	18 BUSFIAL	RETOWN C	IRCLE	-	
CITY-ST-ZIP	BRADENTON, FL 34202		CITY-ST-ZIP	ARASOTA.	FL . 34	232		
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME Street address			NAME STREET ADDRESS				1	
CITY-ST-ZIP			STREET ADDRESS City-St-Zip				1	
TITLE NAME		☐ Delete	TITLE NAME	·		☐ Change	Addition	
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 like empowered.								