

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010720

FILED
Apr 16, 2007
Secretary of State

Entity Name: WHEEL OF THE YEAR, INCORPORATED

Current Principal Place of Business:

8120 121ST AVENUE E
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

PO BOX 15
PARRISH, FL 34219

New Mailing Address:

FEI Number: 20-2439732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, JAMES S REV.
8120 121ST AVENUE E
PARRISH, FL 34219 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: PRES () Delete
Name: HESS, JEANETTE M REV.
Address: 8120 121ST AVENUE E
City-St-Zip: PARRISH, FL 34219

Title: VP () Delete
Name: KISSELL, NICOLE L REV
Address: 8120 121ST AVE E
City-St-Zip: PARRISH, FL 34219

Title: SEC () Delete
Name: KARL, DOOM
Address: 6110 5TH ST E
City-St-Zip: BRADENTON, FL 34207

Title: TREA () Delete
Name: HOLLY, DOOM
Address: 6110 5TH ST E
City-St-Zip: BRADENTON, FL 34207

Title: ELD () Delete
Name: JAMES, BROWN S REV
Address: 8120 121ST AVE E
City-St-Zip: PARRISH, FL 34219

Title: ELD (X) Delete
Name: MONTANO, CONNIE
Address: 6110 5TH ST E
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change () Addition
Name: MONTANO, CONNIE
Address: 6110 5TH ST E
City-St-Zip: BRADENTON, FL 34207

Title: TREA (X) Change () Addition
Name: RUSSELL, TODD R
Address: 811 - 133RD ST E
City-St-Zip: BRADENTON, FL 34212

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 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: TODD R. RUSSELL

TREA

04/16/2007

Electronic Signature of Signing Officer or Director

Date