

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000002291

**FILED**  
**Jan 10, 2010**  
**Secretary of State**

**Entity Name:** TOUCH OF CLASS CORVETTE CLUB, INC

**Current Principal Place of Business:**

1671 N. BOGEY PT.  
HERNANDO, FL 34442 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 632  
INVERNESS, FL 34451 US

**New Mailing Address:**

**FEI Number:** 11-3745579

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MONTY, JO  
1671 N. BOGEY PT.  
HERNANDO, FL 34442 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: P  
Name: KLINE, KAREN  
Address: 53 BELLS OF IRELAND CT.  
City-St-Zip: HOMOSASSA, FL 34446 US

Title: VP  
Name: LUNSFORD, JIM  
Address: 10 QUAILWOOD PATH  
City-St-Zip: HOMOSASSA, FL 34446 US

Title: S  
Name: LUNSFORD, FAYE  
Address: 10 QUAILWOOD PATH  
City-St-Zip: HOMOSASSA, FL 34446 US

Title: T  
Name: MONTY, JO  
Address: 1671 N. BOGEY PT.  
City-St-Zip: HERNANDO, FL 34442 US

I hereby 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 all other like empowered.

**SIGNATURE:** JO MONTY

TREA

01/10/2010

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

\_\_\_\_\_  
Date