

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000012809

1. Entity Name
OLD SCHOOL CLASSIC CAR ASSOCIATION, INC.



FILED

2007 FEB 13 PM 4:51

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business
1014 SILVER RIDGE DR.
TALLAHASSEE, FL 32305-6926

Mailing Address
1014 SILVER RIDGE DR.
TALLAHASSEE, FL 32305-6926



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02102007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
04-3832739

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAWKINS, FAY
1014 SILVER RIDGE DR.
TALLAHASSEE, FL 32305-6926

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

600089291546
02/27/07--01006--002 **61.25

SIGNATURE

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, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
HAWKINS, FAY
1014 SILVER RIDGE DR.
TALLAHASSEE, FL 323056926 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
HAWKINS, BRENDA H
1014 SILVER RIDGE DR.
TALLAHASSEE, FL 323056926 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
JOHNSON, WILLIE J
1990 OAKRIDGE RD.
TALLAHASSEE, FL 32305 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
WHITEHEAD, ELAINE
2001 WILDRIDGE DR.
TALLAHASSEE, FL 32303 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
BROWN, JAMES
1509 LONNIE RD.
TALLAHASSEE, FL 32308 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
BROWN, JAMES
1509 LONNIE RD.
TALLAHASSEE, FL 32308 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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: *Pierda O. Hawkins*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/2007 (850) 878-1461
Date Daytime Phone #