2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012809

FILED Jun 16, 2009 Secretary of State

Entity Name: OLD SCHOOL CLASSIC CAR ASSOCIATION, INC.

| | rincipal Place of Business: | New Prince | cipal Place of Business: |
|---|---|---|---|
| | ER RIDGE DR. SSEE, FL 323056926 | | |
| Current M | lailing Address: | New Maili | ing Address: |
| | ER RIDGE DR. SSEE, FL 323056926 | | |
| n accordan | ce with s. 607.193(2)(b), F.S., the corporation did not red | • | ce. |
| Name and | Address of Current Registered Agent: | Name and | I Address of New Registered Agent: |
| | S, FAY ER RIDGE DR. SSEE, FL 323056926 US | | |
| | e named entity submits this statement for the purp e of Florida. | ose of changing | its registered office or registered agent, or both, |
| SIGNATU | RE: | | |
| | Electronic Signature of Registered Agent | | Date |
| OFFICER | S AND DIRECTORS: | ADDITION | NS/CHANGES TO OFFICERS AND DIRECTOR |
| Fitle: Name: Address: City-St-Zip: | P () Delete HAWKINS, FAY 1014 SILVER RIDGE DR. TALLAHASSEE, FL 323056926 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: | S () Delete HAWKINS, BRENDA H 1014 SILVER RIDGE DR. | Title: Name: | () Change () Addition |
| | TALLAHASSEE, FL 323056926 | Address: City-St-Zip: | |
| City-St-Zip: Fitle: Name: Address: City-St-Zip: | | | ()Change()Addition |
| City-St-Zip: Fitle: Name: Address: | TALLAHASSEE, FL 323056926 VD () Delete JOHNSON, WILLIE J 1990 OAKRIDGE RD. | City-St-Zip: Title: Name: Address: | () Change () Addition T (X) Change () Addition GLORIA, JOHNSON 1990 OAKRIDGE ROAD TALLAHASSEE, FL 32305 |
| City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: | TALLAHASSEE, FL 323056926 VD () Delete JOHNSON, WILLIE J 1990 OAKRIDGE RD. TALLAHASSEE, FL 32305 T () Delete WHITEHEAD, ELAINE 2001 WILDRIDGE DR. | City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: | T (X) Change () Addition GLORIA, JOHNSON 1990 OAKRIDGE ROAD |

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: FAY HAWKINS PRES 06/16/2009