2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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FILED
Mar 21, 2008 8:00 am
Secretary of State
03-03-2008 90193 016 ****66.25

DOCUMENT # N05589

1. Entity Name

FLORIDA FLYWHEELERS ANTIQUE ENGINE CLUB, INC.

bbUU40JJ

1st MOORE CR2E037 (10/07)

Principal Place of Business	Mailing Address
7000 AVON PK CUTOFF RD FORT MEADE FL 33841 US	7000 AVON PK CUTOFF RD FORT MEADE FL 33841 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0010838 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

JOHNSON, CONSTANCE T
1416 PELICAN BAY TRAIL
WINTER PARK FL 32792

7. Name and Address of New Registered Agent

Nar Pasty Russell
Street Address (P.O. Box not acceptable) 7000 Avon Park Cut Off Road
Fort Meade Fl 33841
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.

SIGNATURE _____ 2-20-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHARP, MICHAEL 3850 E. STATE ROAD 46 SANFORD FL 32771-9154	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres Richard Ambler p.o.Box 310 myakka city Fl.34251 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EDWARDS, RICHARD 6401 METZ RD GROVELAND FL 34736	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vp Kevin SAVAGE 7000 Avon Park Cut Off Road Fort Meade, Fl 33841 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P AMBLER, RICHARD P.O. BOX 310 MYAKKA CITY FL 34251	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treas Ruth Gause 23401 Westchester Blvd Port Charlotte, Fl 33980 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD JOHNSON, CONSTANCE T 1416 PELICAN BAY TRAIL WINTER PARK FL 32792	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Charles Gause 23401 Westchester Blvd Port Charlotte, Fl. 33980 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD GAUSE, RUTH 23401 WESTCHESTER BLVD PORT CHARLOTTE FL 33980	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Harvey Haines 7269 E, Horse Hammock Rd Avon Park Fl, 33825 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GUSTAFSON, JACK J 4420 JIM BRANCH RD KISSIMMEE FL 34744	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Dave Lobdell 4880 Tallowood Way Naples Fl. 33830 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Ruth G Gause 2-20-08 941-627-5281
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Patsy Russell