

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05589

FILED
Mar 24, 2009
Secretary of State

Entity Name: FLORIDA FLYWHEELERS ANTIQUE ENGINE CLUB, INC.

Current Principal Place of Business:

7000 AVON PK CUTOFF RD
FORT MEADE, FL 33841 US

New Principal Place of Business:

Current Mailing Address:

7000 AVON PK CUTOFF RD
FORT MEADE, FL 33841 US

New Mailing Address:

FEI Number: 65-0010838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUSSELL, PASTY
7000 AVON PARK CUT OFF ROAD
FORT MEADE, FL 33841 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 () Delete
Name: AMBLER, RICHARD
Address: P.O. BOX 310
City-St-Zip: MYAKKA CITY, FL 34251

Title: VP () Delete
Name: SAVAGE, KEVIN
Address: 7000 AVON PARK CUT OFF ROAD
City-St-Zip: FORT MEADE, FL 33841

Title: T () Delete
Name: GAUSE, RUTH
Address: 23401 WESTCHESTER BLVD
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: D () Delete
Name: GAUSE, CHARLES
Address: 23401 WESTCHESTER BLVD
City-St-Zip: PORT CHARLOTTE, FL 33980 US

Title: D () Delete
Name: HAINES, HARVEY
Address: 7269 E HORSE HAMMOCK RD
City-St-Zip: AVON PARK, FL 33825 US

Title: D () Delete
Name: LOBDELL, DAVE
Address: 4880 TALLOWOOD WAY
City-St-Zip: NAPLES, FL 33830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SAVAGE, KEVIN
Address: 7000 AVON PARK CUT OFF ROAD
City-St-Zip: FORT MEADE, FL 33841

Title: VP (X) Change () Addition
Name: GAUSE, CHARLES
Address: 23401 WESTCHESTER BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: T (X) Change () Addition
Name: CRANDALL, MICHAEL A
Address: 16200 HWY. 27
City-St-Zip: LAKE WALES, FL 33859

Title: D (X) Change () Addition
Name: RUSSELL, PATSY
Address: 7000 AVON PARK CUT OFF RD.
City-St-Zip: FORT MEADE, FL 33841 US

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 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: CHARLES GAUSE

VP

03/24/2009

Electronic Signature of Signing Officer or Director

Date