

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05651

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** SOUTH PASCO COUNTY VOITURE 1576, 40/8, INCORPORATED.

**Current Principal Place of Business:**

5329 LEGION PLACE  
NEW PORT RICHEY, FL 34652 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 113  
NEW PORT RICHEY, FL 34656 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

HERIG, JOHN  
7820 SYCAMORE DR  
NEW PORT RICHEY, FL 34654 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: D  
Name: HERIG, JOHN  
Address: 7820 SYCAMORE DR  
City-St-Zip: NEW PORT RICHEY, FL

Title: D  
Name: JORDAN, SCOTT G  
Address: 8060 SYCAMORE DR  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: D  
Name: SCHMIDT, MICHAEL  
Address: 5348 COTEE RIVER DR  
City-St-Zip: NEW PORT RICHEY, FL 34652

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: SCOTT G JORDAN

D

01/06/2012

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

\_\_\_\_\_  
Date