

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 25, 2008 8:00 am**  
**Secretary of State**

02-25-2008 90058 049 \*\*\*\*61.25

**DOCUMENT # N06000000967**

1. Entity Name  
**TRI-COUNTY HONDA DEALERS ADVERTISING  
ASSOCIATION, INC.**



40051100

Principal Place of Business  
**3707 DAVIS BLVD.  
NAPLES, FL 34104**

Mailing Address  
**3707 DAVIS BLVD.  
NAPLES, FL 34104**



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01242008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**20-4205415**

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

**RUSINIK, SAMUEL  
3707 DAVIS BLVD.  
NAPLES, FL 34104**

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.

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, 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  
**PTD  
RUSINIK, SAM  
3707 DAVIS BLVD  
NAPLES, FL 34104** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VPSD  
HAMILL, BOB  
1252 TAMiami TRAIL  
PORT CHARLOTTE, FL 33953** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
PETER D'ANGELO  
HONDA OF FORT MYERS  
14020 SOUTH TAMiami TRAIL  
FORT MYERS, FL 33912** ☐ Delete

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

TITLE  
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☐ 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:

*SAM RUSINIK* PRESIDENT **SAM RUSINIK**

**2/12/08**

**239-643-4044**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #