## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jun 12, 2007 8:00 am Secretary of State

DOCUMENT # N0600006620  1. Entity Name TREASURE COAST JEEP CLUB, INC.						etary of St 007 90111 010 ****7		
Principal Plac 121 HARRIS SEBASTIAN,	DRIVE	Mailing Address 121 <b>HARRI</b> S DRIVE SEBASTIAN, FL 32958		4.		IBIN BBIN BBIN BBIN BBIN BUN SINB CIBN	<b>15</b> (4) <b>5</b> ( 5) (4 <b>5</b> )	
2. Principal P	lace of Business - No P.O. Box# Sterling La Ke Dr	3. Mailing Address POBOX	2338					
Suite, Apt.	#, etc. ]	Suite, Apt. #, etc.			2007 Chg-NP	CR2E037 (12/06	<u> </u>	
City & State Fort	Pierce, FL	Vevo Beach	Country	4. FE	Number 0-5166		Applied For Not Applicable	
3495		32960	Indian R	5. Ce	rtificate of Status Des	Fee Requ		
	6. Name and Address of Current F	Registered Agent	Name			New Registered Agent		
121 HARRIS DRIVE Street Address (				<u> harle</u> Idress (P.O. Bo)	ATLES BLAIT (P.O. Box Number is Not Acceptable)			
SEBASTIAN, FL 32958				5701 Sterling Lake Drive Fort Pierce FL 34951				
			City	=ort	Pierce	FL 320		
8. The above	named entity submits this statement for ions of registered agent.	the purpose of changing its re	egistered office or	registered agen	t, or both, in the State	e of Florida. I am familiar wit		
SIGNATURE Manufacture, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling)								
Filing Fee is \$61.25 Due by September 14, 2007  9. Election Campaign Financing Trust Fund Contribution.				\$5.00	May Be	Make check payable	to	
	ue by September 14, 2007	Trust Fund Co	ntribution.	Added 1	o Fees	Florida Department of		
10.	OFFICERS AND DIR	ECTORS	11.	- Added t	o Fees		State IN 10	
10.	OFFICERS AND DIR	1	11.	Added 1	o Fees NS/CHANGES TO OI S. Kent	FIORIDA DEPARTMENT OF FFICERS AND DIRECTORS Change	State IN 10	
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIO Myer 4903	ofees NS/CHANGES TO OI S Kent Murtle	FFICERS AND DIRECTORS Change	State IN 10 Addition	
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The Boy Certify that the information supplied with this lining does not quality 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/6/07 (772)461-1682