

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012700

FILED
Jan 24, 2009
Secretary of State

Entity Name: VETTE MASTERS OF FLORIDA, INC.

Current Principal Place of Business:

8020 SIERRA GARDENS DR.
JACKSONVILLE, FL 32219

New Principal Place of Business:

11117 ARISTIDES WAY
JACKSONVILLE, FL 32218

Current Mailing Address:

8020 SIERRA GARDENS DR.
JACKSONVILLE, FL 32219

New Mailing Address:

11117 ARISTIDES WAY
JACKSONVILLE, FL 32218

FEI Number: 20-8333011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARTIN, GEORGE L. JR.
8020 SIERRA GARDENS DR.
JACKSONVILLE, FL 32219 US

Name and Address of New Registered Agent:

BROOKS, DONALD C
11117 ARISTIDES WAY
JACKSONVILLE, FL 32218 US

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: DONALD C. BROOKS

01/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MARTIN, GEORGE L. JR.
Address: 8020 SIERRA GARDENS DR.
City-St-Zip: JACKSONVILLE, FL 32219

Title: DT () Delete
Name: HAYNES, ROMARION
Address: 1329 SHEARWATER DR.
City-St-Zip: JACKSONVILLE, FL 32209

Title: DV () Delete
Name: BROOKS, DONALD C.
Address: 11117 ARISTIDES WAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: DS () Delete
Name: BRANCH, RENEE
Address: 5469 MONCRIEF RD.
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BROOKS, DONALD C
Address: 11117 ARISTIDES WAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: SMITH, GEORGE
Address: 8022 TESSA TERRACE
City-St-Zip: JACKSONVILLE, FL 32244

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: DONALD C. BROOKS

MR.

01/24/2009

Electronic Signature of Signing Officer or Director

Date