2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005
Secretary of State

DOCUMENT# N06738

Entity Name: SUNCOAST CORVETTE ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 425
CLEARWATER, FL 33757

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 425
CLEARWATER, FL 33757

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:

BAUER, LINDA
14353 110TH TERR. NO.
LARGO, FL 34644 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: PD ( ) Delete
Name: KARR, MICHAEL
Address: 7040 NICOLE LANE
City-St-Zip: LARGO, FL 33771

Title: VPSD ( ) Delete
Name: JOHNSON, MILTON
Address: 314 WINDRUSH BLVD., #13
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: TD ( ) Delete
Name: TAYLOR-SMITH, MITZI
Address: 7169 HAMILTON PARK BLVD.
City-St-Zip: TAMPA, FL 33615

Title: D ( ) Delete
Name: KARR, SHANNON
Address: 7040 NICOLE LANE
City-St-Zip: LARGO, FL 33771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPSD (X) Change ( ) Addition
Name: GREENE, GEORGIA
Address: 10603 95TH ST. N.
City-St-Zip: LARGO, FL 33777

Title: TD (X) Change ( ) Addition
Name: JOHNSON, MILTON
Address: 314 WINDRUSH BLVD., #13
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL KARR PD 01/21/2005

Electronic Signature of Signing Officer or Director — Date