

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2008 8:00 am
Secretary of State

07-14-2008 90027 023 ****70.00

| | | | | | |
|--|--|--|--|--|--|
| DOCUMENT # N07000002284 1. Entity Name THE VILLAGES VINTAGE CAR CLUB INC. | | | | | |
| Principal Place of Business 17078 SE 80TH LOCUSTWOOD CT THE VILLAGES, FL 32162 | | | | Mailing Address 17078 SE 80TH LOCUSTWOOD CT THE VILLAGES, FL 32162 | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. SAME AS ABOVE | | Suite, Apt. #, etc. SAME AS ABOVE | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | | |
| 4. FEI Number 07022008 Chg-NP CR2E037 (12/06) | | | | | |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | | | | | <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
| 6. Name and Address of Current Registered Agent FERLISI, MICHAEL 17078 SE 80TH LOCUSTWOOD CT THE VILLAGES, FL 32162 | | | 7. Name and Address of New Registered Agent Name SAME 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 <u><i>Michael J. Ferlisi Jr.</i></u> DATE <u><i>7/3/08</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| Filing Fee is \$61.25 Due by September 12, 2008 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$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 | P DECAMP, JAY 9300 SE 171 ST LEFLORE LANE THE VILLAGES, FL 32162 <input checked="" type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P MAZURRO, JIM 2341 FIVE FORK TRAIL THE VILLAGES, FL. 32162 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V CRISWELL, TOM 508 KEMPTON PLACE THE VILLAGES, FL 32162 <input checked="" type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | V PITTMAN, KEN 17999 SE 89TH ROTHWAY COURT THE VILLAGES, FL. 32162 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S VARGA, MIKE 17480 SE 75TH COACHMAN CT THE VILLAGES, FL 32162 <input checked="" type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | S BARRETT, JOANNE 1299 PASELAND WAY THE VILLAGES, FL. 32162 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T FERLISI, MIKE 17078 SE 80TH LOCUSTWOOD CT THE VILLAGES, FL 32162 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | T SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> 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: <u><i>MICHAEL J. FERLISI JR.</i></u> <i>Michael J. Ferlisi Jr.</i> 7/3/08 352-751-3642 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | | | |