

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08277

FILED  
Apr 30, 2006  
Secretary of State

**Entity Name:** FLORIDA FIRST COAST ALFA ROMEO OWNERS CLUB, INC.

**Current Principal Place of Business:**

C/O JOHN HAGADORN  
2584 EMPEROR DRIVE  
JACKSONVILLE, FL 32223 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOHN HAGADORN  
2584 EMPEROR DRIVE  
JACKSONVILLE, FL 32223 US

**New Mailing Address:**

**FEI Number:** 59-2521278

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DUSS, JOHN S IV  
10110 SAN JOSE BLVD.  
JACKSONVILLE, FL 32257 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: D ( ) Delete  
Name: HAGADORN, JOHN  
Address: 2584 EMPEROR DR.  
City-St-Zip: JACKSONVILLE, FL 32223

Title: P/D ( ) Delete  
Name: SCANLAN, DAN  
Address: 7630 POTTSBURG LANDING DRIVE  
City-St-Zip: JACKSONVILLE, FL 32212

Title: T/D ( ) Delete  
Name: DUSS, JOHN S.,IV,  
Address: 10110 SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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: JOHN HAGADORN

D

04/30/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date