

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT # N12863

1. Entity Name
FLORIDA ANTIQUE POWER CLUB, INC.



Principal Place of Business

DAN SWEET
630 KIRKWOOD TERRACE N
ST PETERSBURG, FL 33701 US

Mailing Address

DAN SWEET
630 KIRKWOOD TERRACE N
ST PETERSBURG, FL 33701 US



04202004 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2637240

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SWEET, DAN
630 KIRKWOOD TERRACE NORTH
ST. PETERSBURG, FL 33701

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000127445
04/23/04-80074-017 70.00

10. OFFICERS AND DIRECTORS

TITLE **V**
NAME **BENEDICT, BRIAN H**
STREET ADDRESS **4402- 78TH ST N.**
CITY-ST-ZIP **SAINT PETERSBURG, FL 33709**

TITLE **D**
NAME **CORUM, HAL J**
STREET ADDRESS **5636 101ST CIRCLE NORTH**
CITY-ST-ZIP **PINELLAS PARK, FL 34666**

TITLE **ST**
NAME **BOWEN, BONNIE L**
STREET ADDRESS **6145 CEDAR STREET, NE**
CITY-ST-ZIP **ST. PETERSBURG, FL**

TITLE **D**
NAME **BOWEN, MIKE**
STREET ADDRESS **6145 CEDAR STREET, NE**
CITY-ST-ZIP **ST. PETERSBURG, FL 33703**

TITLE **PD**
NAME **SWEET, DAN**
STREET ADDRESS **630 KIRKWOOD TERRACE, NORTH**
CITY-ST-ZIP **ST. PETERSBURG, FL**

TITLE **D**
NAME **VANDEN BERG, HERB B**
STREET ADDRESS **1409 SATSUMA ST**
CITY-ST-ZIP **CLEARWATER, FL 33759**

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Dan Sweet

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-04 (727) 823-0296

Date

Daytime Phone #