

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N23844** (6)

1. Corporation Name

**ANTIQUE AUTOMOBILE CLUB OF AMERICA, SOUTH FLORIDA REGION, INC.**



Principal Place of Business

**1510 SARRIA AVE  
MIAMI FL 33146  
US**

Mailing Address

**C/O GOEBEL, HARRY B.  
1510 SARRIA AVE.  
CORAL GABLES FL 33146  
US**

3. Date Incorporated or Qualified  
**12/07/1987**

3a. Date of Last Report  
**07/26/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number  
**59-2878377**

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HARRIS, BEN  
2235 S.W. 34TH AVE  
MIAMI FL 33145**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Ben Harris*

(NOTE: Registered Agent signature required when reinstating)

**1-18-96**

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE  
NAME **MAVER, BOB**  
STREET ADDRESS **10285 S.W. 135 STREET**  
CITY-ST-ZIP **MIAMI FL**

1.1 TITLE **SPELLING** ☒ Change ☐ Addition  
1.2 NAME **MAYER, BOB**  
1.3 STREET ADDRESS **10285 S.W. 135 STREET**  
1.4 CITY-ST-ZIP **MIAMI FL**

TITLE **SD** ☒ DELETE  
NAME **YAMPOLSKY, MELVIN**  
STREET ADDRESS **1110 N.W. 186 ST.**  
CITY-ST-ZIP **NO. MIAMI FL**

2.1 TITLE **SECRETARY** ☒ Change ☐ Addition  
2.2 NAME **TRUITT, NANCY**  
2.3 STREET ADDRESS **73 CAMPINA CT.**  
2.4 CITY-ST-ZIP **CORAL GABLES, FL 33134**

TITLE **D** ☐ DELETE  
NAME **ROSCOE, AL**  
STREET ADDRESS **5861 SW 89TH PL**  
CITY-ST-ZIP **MIAMI FL**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **REYES, NELSON**  
STREET ADDRESS **1110 NW 186 ST**  
CITY-ST-ZIP **N MIAMI FL**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE **TD** ☐ DELETE  
NAME **GOEBEL, HARRY B**  
STREET ADDRESS **1510 SARRIA AVE.**  
CITY-ST-ZIP **CORAL GABLES FL**

5.1 TITLE **SPELLING** ☒ Change ☐ Addition  
5.2 NAME **GOEBEL, HARRY B**  
5.3 STREET ADDRESS **1510 SARRIA AVE**  
5.4 CITY-ST-ZIP **CORAL GABLES, FL**

TITLE **VPD** ☐ DELETE  
NAME **GREENSTEIN, SID**  
STREET ADDRESS **5131 S.W. 87 AVE**  
CITY-ST-ZIP **MIAMI FL**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Bob Mayer*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**1-18-96**

CR2E037 (12/95)