

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25048

FILED
Feb 11, 2005
Secretary of State

Entity Name: STUART CORVETTE CLUB, INC.

Current Principal Place of Business:

PO BOX 2694
STUART, FL 34995 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2694
STUART, FL 34995 US

New Mailing Address:

FEI Number: 65-0005061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KESSLER, DICK
648 BANYAN RD
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

HOSLER, JOHN C
3641 NE SUGARHILL AVE.
JENSEN BEACH, FL 349573730 US

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: JOHN C. HOSLER

02/11/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: HOWARD, SUSAN
Address: 3614 NW PIN OAK DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: S () Delete
Name: FISHER, BARBARA
Address: 2565 SW HALISSEE ST
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VP () Delete
Name: NOWAK, RON
Address: 2406 SW HIDEWAY LANE
City-St-Zip: STUART, FL 34994

Title: P () Delete
Name: KESLER, DICK
Address: 648 BANYAN RD
City-St-Zip: VERO BEACH, FL 32963

Title: D () Delete
Name: SOBCZAK, RUSSELL
Address: 8280 HIDDEN PINES RD
City-St-Zip: FT. PIERCE, FL 34945

Title: D () Delete
Name: LAGANA, BILL
Address: 701 SW STUART WEST BLVD
City-St-Zip: PALM CITY, FL 34984

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: CLEGG, JOHN
Address: 6116 NW SNOOK COURT
City-St-Zip: PORT ST. LUCIE, FL 34983

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

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

Title: P (X) Change () Addition
Name: HOSLER, JOHN C
Address: 3641 NE SUGARHILL AVE.
City-St-Zip: JENSEN BEACH, FL 349573730

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 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: JOHN C. HOSLER

P

02/11/2005

Electronic Signature of Signing Officer or Director

Date