

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 25, 1999 8:00 am
Secretary of State

04-25-1999 90030 008 ****61.25

DOCUMENT # N25411

1. Corporation Name

MID-FLORIDA TOYOTA DEALERS ASSOCIATION, INC.

Principal Place of Business

C/O FENDER, GEORGE S
1836 WOODWARD ST
ORLANDO FL 32803
US

Mailing Address

C/O FENDER, GEORGE S
1836 WOODWARD ST
ORLANDO FL 32803
US



2. Principal Place of Business

21 c/o Sommers Everhart & Kohler

Suite, Apt. #, etc.

22 380 Columbia Drive #111

City & State

23 West Palm Beach, FL

Zip

24 33409

Country

25 USA

2a. Mailing Address

26 c/o Sommers Everhart & Kohler

Suite, Apt. #, etc.

27 380 Columbia Drive #111

City & State

28 West Palm Beach, FL

Zip

29 33409

Country

30 USA

3. Date Incorporated or Qualified

03/09/1988

4. FEI Number

59-2883345

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

FENDER, GEORGE S
1836 WOODWARD ST
ORLANDO FL 32803

10. Name and Address of New Registered Agent

81 Name
Scott Clark

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

83 2925 North Highway 17-92

84 City
Longwood

FL

85 Zip Code
32752

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME KAFERY, GEORGE
STREET ADDRESS 2535 N ORANGE BLOSSOM TRL
CITY-ST-ZIP KISSIMMEE FL 34744

TITLE ATD ☒ DELETE
NAME FENDER, GEORGE S.
STREET ADDRESS 1836 WOODWARD ST
CITY-ST-ZIP ORLANDO FL 32803

TITLE STD ☒ DELETE
NAME SMIGLIA, JOE
STREET ADDRESS 3800 W COLONIAL DR
CITY-ST-ZIP ORLANDO FL 32803

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VPD ☒ Change ☐ Addition
1.2 NAME Kazery, George
1.3 STREET ADDRESS 2535 N. Orange Blossom Trail
1.4 CITY-ST-ZIP Kissimmee, FL 34744

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME Clark, Scott
4.3 STREET ADDRESS 2925 North Highway 17-92
4.4 CITY-ST-ZIP Longwood, FL 32752

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME Kennedy, Bill
5.3 STREET ADDRESS 1545 Merritt Island Causeway
5.4 CITY-ST-ZIP Merritt Island, FL 32962

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

14. 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 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 appointment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)