

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90226 029 ****61.25

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DOCUMENT # N26001

1. Entity Name

SPACE COAST REGION, ANTIQUE AUTOMOBILE CLUB OF A

Principal Place of Business

2121 SO HOPKINS AVE.
TITUSVILLE FL 32780
US

Mailing Address

P.O. BOX 5837
TITUSVILLE FL 32783
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2961610

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOSHARA, DON
3825 COTTONWOOD DRIVE
TITUSVILLE FL 32780

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME LACOY, JIM
STREET ADDRESS 102 S. SINGLETON
CITY-ST-ZIP TITUSVILLE FL 32796

TITLE PD ☐ Change ☒ Addition
NAME KENNETH MANGOLD
STREET ADDRESS 2605 TOUPS TR
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE VD ☒ Delete
NAME MANGOLD, KEN
STREET ADDRESS 4870 CATHEDRAL WAY
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE VD ☐ Change ☒ Addition
NAME MICHAEL CUNNINGHAM
STREET ADDRESS 2495 CHERRYWOOD LN
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE S ☒ Delete
NAME LACOY, ALICE
STREET ADDRESS 102 S. SINGLETON
CITY-ST-ZIP TITUSVILLE FL 32796

TITLE S ☐ Change ☒ Addition
NAME JILL MANGOLD
STREET ADDRESS 2605 TOUPS TR
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE TD ☐ Delete
NAME DON BOSHARA
STREET ADDRESS 3825 COTTONWOOD DRIVE
CITY-ST-ZIP TITUSVILLE FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME HOWARD EARLES
STREET ADDRESS 4037 FAIRFAX RD
CITY-ST-ZIP MIMS FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME DODD, FLOYD L
STREET ADDRESS 1785 COWAN DRIVE
CITY-ST-ZIP TITUSVILLE FL 32796

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: DON BOSHARA, Treas. 4-16-01 321-268-3384

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)