

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90291 038 ****61.25

816263



DO NOT WRITE IN THIS SPACE

DOCUMENT # N29589 1. Entity Name TAMPA BAY ANTIQUE VEHICLE ASSOCIATION, INC.																															
Principal Place of Business LUTZ CENTER 100 1ST NW LUTZ FL 33549 US		Mailing Address P.O. BOX 1321 LUTZ FL 33549																													
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																													
City & State		City & State																													
Zip	Country	Zip	Country																												
6. Name and Address of Current Registered Agent WALTERS, EDWARD 16535 SILVERHILL TAMPA FL 33624		7. Name and Address of New Registered Agent Name VANN, JERALD Street Address (P.O. Box Number is Not Acceptable) 2801 ROBERTSON TRAIL City LUTZ FL Zip Code 33549																													
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 <i>Jerald J. Vann</i> 02/22/01 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																															
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees																													
Make Check Payable to Department of State																															
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</th> </tr> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 70%;">P WALTERS, EDWARD 16535 SILVERHILL TAMPA FL 33624 <input checked="" type="checkbox"/> Delete</td> <td style="width: 30%;">TITLE</td> <td style="width: 70%;">VANN, JERALD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2801 ROBERTSON TRAIL LUTZ, FL. 33549</td> </tr> <tr> <td>TITLE</td> <td>VP SIGLER, MARVIN 914 WHITAKER RD LUTZ FL 33549 <input type="checkbox"/> Delete</td> <td>TITLE</td> <td>UP SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>S SIGLER, MARILYN 914 WHITAKER RD LUTZ FL 33549 <input type="checkbox"/> Delete</td> <td>TITLE</td> <td>S SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>D WALTERS, RUTH 16535 SILVERHILL DRIVE TAMPA FL 33624 <input checked="" type="checkbox"/> Delete</td> <td>TITLE</td> <td>D BRYANT, TOM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 906 NEWBERGER ROAD LUTZ, FL 33549</td> </tr> <tr> <td>TITLE</td> <td>T LODATO, SANDY 7504 N FLEN AVE TAMPA FL 33614 <input type="checkbox"/> Delete</td> <td>TITLE</td> <td>T SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>D NOVAK, DICK 9033 DIXANA VILLA CIR TAMPA FL 33635 <input checked="" type="checkbox"/> Delete</td> <td>TITLE</td> <td>D GLAZE, LEROY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9602 HAGADORN ROAD RIVERVIEW, FL 33569</td> </tr> </table>				10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		TITLE	P WALTERS, EDWARD 16535 SILVERHILL TAMPA FL 33624 <input checked="" type="checkbox"/> Delete	TITLE	VANN, JERALD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2801 ROBERTSON TRAIL LUTZ, FL. 33549	TITLE	VP SIGLER, MARVIN 914 WHITAKER RD LUTZ FL 33549 <input type="checkbox"/> Delete	TITLE	UP SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	S SIGLER, MARILYN 914 WHITAKER RD LUTZ FL 33549 <input type="checkbox"/> Delete	TITLE	S SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	D WALTERS, RUTH 16535 SILVERHILL DRIVE TAMPA FL 33624 <input checked="" type="checkbox"/> Delete	TITLE	D BRYANT, TOM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 906 NEWBERGER ROAD LUTZ, FL 33549	TITLE	T LODATO, SANDY 7504 N FLEN AVE TAMPA FL 33614 <input type="checkbox"/> Delete	TITLE	T SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	D NOVAK, DICK 9033 DIXANA VILLA CIR TAMPA FL 33635 <input checked="" type="checkbox"/> Delete	TITLE	D GLAZE, LEROY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9602 HAGADORN ROAD RIVERVIEW, FL 33569
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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: Jerald Vann JERALD VANN 2-22-01 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																															

CR2E037 (10/00)