

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90044 027 ****70.00

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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

Same as above

3. Mailing Address

SAME as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2890954

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

SHIPLEY, JOE
10706 SASSAFRAS ST
TAMPA FL 33617

7. Name and Address of New Registered Agent

Name

CHEWNING, SANDRA

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

14307 GRAFTON PLACE

City

TAMPA

FL

Zip Code

33625

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

SANDRA CHEWNING

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

Sandra Chewning

(NOTE: Registered Agent Signature required when reinstating)

2-9-06

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE VP
NAME VOORHES, GEORGE ☒ Delete
STREET ADDRESS 208 E FERN STREET
CITY-ST-ZIP TAMPA FL 33604

TITLE S
NAME COVERT, SHARON ☒ Delete
STREET ADDRESS 18168 SANDY POINT DR.
CITY-ST-ZIP TAMPA FL 33647

TITLE T
NAME CICCARELLO, BEN ☒ Delete
STREET ADDRESS 4540 W CLIFTON AVE
CITY-ST-ZIP TAMPA FL 33614

TITLE D
NAME VANN, GERALD ☒ Delete
STREET ADDRESS 2801 ROBERTSON TR
CITY-ST-ZIP LUTZ FL 33559

TITLE P
NAME SHIPLEY, JOE ☒ Delete
STREET ADDRESS 10706 SASSAFRAS ST.
CITY-ST-ZIP TAMPA FL 33617

TITLE D
NAME CONVERT, BRUCE ☒ Delete
STREET ADDRESS 18168 SANDY PT DR
CITY-ST-ZIP TAMPA FL 33647

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE (PRESIDENT) SANDRA CHEWNING ☒ Change ☐ Addition
NAME
STREET ADDRESS 14307 GRAFTON PLACE
CITY-ST-ZIP TAMPA, FL 33625

TITLE (VPRESIDENT) JOHN GARCIA ☒ Change ☐ Addition
NAME
STREET ADDRESS 18945 CROOKED LANE
CITY-ST-ZIP LUTZ, FL 33549

TITLE (SECRETARY) JOY GONZALEZ ☒ Change ☐ Addition
NAME
STREET ADDRESS 7008 COLLEY RD
CITY-ST-ZIP ODESSA, FL 33556

TITLE (TREASURER) SIDNEY MOSS ☒ Change ☐ Addition
NAME
STREET ADDRESS 6040 COUNTRY CLUB RD
CITY-ST-ZIP WESLEY CHAPEL, FL 33544

TITLE (D) GERALD VANN ☒ Change ☐ Addition
NAME
STREET ADDRESS 2801 ROBERTSON TR.
CITY-ST-ZIP LUTZ, FL 33559

TITLE (D) BRUCE COVERT ☒ Change ☐ Addition
NAME
STREET ADDRESS 18168 SANDY PT DR
CITY-ST-ZIP TAMPA, FL 33647

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Sandra Chewning, SANDRA CHEWNING, 2/9/06 813-908-7343