

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N34599

FILED  
Apr 08, 2003  
Secretary of State

Entity Name: ALFA ROMEO CLUB OF CENTRAL FLORIDA, INC.

## Current Principal Place of Business:

1751 CHINOOK TRAIL  
MAITLAND, FL 32751 US

## New Principal Place of Business:

## Current Mailing Address:

1751 CHINOOK TRAIL  
MAITLAND, FL 32751 US

## New Mailing Address:

FEI Number: 59-3004628

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KEIFER, ROBERT W  
319 N FERN CREEK AVE  
ORLANDO, FL 32803 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: MCLAUGHLIN, ELLEN  
Address: 401 N NIBLICK LN, BOX 103  
City-St-Zip: LAKE MARY, FL 32746

Title: P ( ) Delete  
Name: HENDERSON, JOHN  
Address: 1751 CHINOOK TRAIL  
City-St-Zip: MAITLAND, FL 32751

Title: S ( ) Delete  
Name: EASTWOOD, MARIANNE  
Address: 261 SPRING LANE  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: MORGAN, ERIC  
Address: 806 E ANDERSON ST  
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete  
Name: HENDERSON, DIANE  
Address: 1751 CHINOOK TRAIL  
City-St-Zip: MAITLAND, FL 32751

Title: T ( ) Delete  
Name: JONES, PAUL  
Address: 9089 WOODBREEZE BLVD  
City-St-Zip: WINDERMERE, FL 34786

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: THEODORE, ROBERT  
Address: 9501 KILGORE RD  
City-St-Zip: ORLANDO, FL 32836

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

Title: S (X) Change ( ) Addition  
Name: HENDERSON, DIANE  
Address: 1751 CHINOOK TRAIL  
City-St-Zip: MAITLAND, FL 32751

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: ROBERT THEODORE

D

04/08/2003

Electronic Signature of Signing Officer or Director

Date