

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N43319 (5)

1. Corporation Name

FT. LAUDERDALE CORVETTE CLUB, INC.



Principal Place of Business

Mailing Address

**1260 NW 8TH STREET
BOCA RATON FL 33486**

**1260 NW 8TH STREET
BOCA RATON FL 33486**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

05/08/1991

3a. Date of Last Report

02/01/1995

4. FEI Number

65-0259867

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

**KROOSS, RICHARD
1260 NW 8TH STREET
BOCA RATON FL 33486**

81 Name

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

83

84 City

FL

85 Zip Code

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 reappointing.)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **KROSS, RICHARD**
STREET ADDRESS **1260 NW 8TH STREET**
CITY-ST-ZIP **BOCA RATON FL**

TITLE **DP** ☒ DELETE
NAME **JONES, JOANIE**
STREET ADDRESS **250 CORSAIR AVE**
CITY-ST-ZIP **LAUDERDALE BY THE SEA FL**

TITLE **DS** ☒ DELETE
NAME **PFITZENMAIER, SHIRLEY**
STREET ADDRESS **252 SW 23RD STREET**
CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE **DVP** ☒ DELETE
NAME **TURNER, PAUL**
STREET ADDRESS **8804 IVY COURT**
CITY-ST-ZIP **DAVIE FL**

TITLE **DT** ☒ DELETE
NAME **KROOSS, MARY**
STREET ADDRESS **1260 NW 8TH STREET**
CITY-ST-ZIP **BOCA RATON FL**

TITLE **D** ☒ DELETE
NAME **DE LUCA, FRANK**
STREET ADDRESS **10171 NW 3RD STREET**
CITY-ST-ZIP **CORAL SPRINGS FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☐ Change ☒ Addition
1.2 NAME **MESSURI, PETER**
1.3 STREET ADDRESS **1560 NW 11TH STREET**
1.4 CITY-ST-ZIP **BOCA RATON, FL 33486**

2.1 TITLE **DP** ☐ Change ☒ Addition
2.2 NAME **TURNER, PAUL D.**
2.3 STREET ADDRESS **8804 IVY COURT**
2.4 CITY-ST-ZIP **DAVIE, FL 33328**

3.1 TITLE **DS** ☐ Change ☒ Addition
3.2 NAME **BROWN, ANDREA P.**
3.3 STREET ADDRESS **5900 BLUE BEECH PLACE**
3.4 CITY-ST-ZIP **TAMARAC, FL 33319**

4.1 TITLE **DVP** ☐ Change ☒ Addition
4.2 NAME **WOOD, WAYNE**
4.3 STREET ADDRESS **508 GARDENS DRIVE, #104**
4.4 CITY-ST-ZIP **POMPAÑO BEACH, FL 33069**

5.1 TITLE **DT** ☐ Change ☒ Addition
5.2 NAME **BROWN STEVEN**
5.3 STREET ADDRESS **5900 BLUE BEECH PLACE**
5.4 CITY-ST-ZIP **TAMARAC, FL 33319**

6.1 TITLE **D** ☐ Change ☒ Addition
6.2 NAME **PFITZENMAIER, SHIRLEY**
6.3 STREET ADDRESS **252 SW 23RD STREET**
6.4 CITY-ST-ZIP **FORT LAUDERDALE, FL 33315**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attachment with an address.

SIGNATURE:

Andrea P. Brown, Andreea P. Brown 3/25/96 954 486-8822
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)