

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N49865

1. Corporation Name

EVERGLADES MIATA CLUB, INC.

Principal Place of Business

4360 PETERS ROAD
FT LAUDERDALE FL 33317

Mailing Address

4360 PETERS ROAD
FT LAUDERDALE FL 33317

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21. Suite, Apt. #, etc.		2b. Suite, Apt. #, etc.		07/14/1992	
22. City & State		2c. City & State		4. FEI Number	
23. Zip		2d. Zip		65-0931838	
24. Country		2e. Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
25. Country		2f. Country		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	

8. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SMITH, RICHARD G.E. 4360 PETERS ROAD FT LAUDERDALE FL 33317		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. State	
		85. Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, 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 retitling)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D. WARRICK, PETER	1.1 TITLE	
NAME	4360 PETERS ROAD	1.2 NAME	
STREET ADDRESS	FT LAUDERDALE FL 33317	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D. WARRICK, SHERRY	2.1 TITLE	
NAME	4360 PETERS ROAD	2.2 NAME	
STREET ADDRESS	FT LAUDERDALE FL 33317	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D. FLAKE, MARGARETE	3.1 TITLE	
NAME	4360 PETERS ROAD	3.2 NAME	
STREET ADDRESS	FT LAUDERDALE FL 33317	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED WARRICK

4/1/99 (954) 583-3900

SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR

(4) 65-0931838

CR2037 (1/98)