2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50218

FILED Jan 16, 2009 Secretary of State

Entity Name: THE VETTE SET CORVETTE CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 7986 COUNTY LINE ROAD 4600 SW 41ST BLVD MELROSE, FL 32666 GAINESVILLE, FL 32608 US **Current Mailing Address: New Mailing Address:** P O BOX 5322 GAINESVILLE, FL 32601 US FEI Number: 59-3137362 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PAUL, RODNEY C COLE, DION 7986 COUNTY LINE ROAD 256 SW GENTLE GLEN MELROSE, FL 32666 LAKE CITY, FL 32024 US 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: DION COLE 01/16/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HOLTON, DANIEL L Name: Name: 14617 SW 79TH STREET Address: Address: City-St-Zip: ARCHER, FL 32618 US City-St-Zip: Title: V/D () Delete Title: () Change () Addition Name: DEVLIN, FRANK Name: Address: 6150 NE 131ST AVENUE Address: City-St-Zip: WILLISTON, FL 32696 US City-St-Zip: Title: T/D () Delete Title: T/D (X) Change () Addition POPE, DAN Name: MERCIER, DENIS Name: 853 NW 2ND AVE Address: Address: 519 SW 129TH TERRACE City-St-Zip: WILLISTON, FL 32696 US City-St-Zip: NEWBERRY, FL 32669 US Title: S/D () Delete Title: () Change () Addition Name: DEVLIN, ROBERTA Name: Address: 6150 NE 131ST AVENUE Address: City-St-Zip: WILLISTON, FL 32696 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DANIEL L HOLTON P/D 01/16/2009