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NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # N9300000047 (1)
1. Corporation Name

SUNSHINE STATE CAMARO CLUB, INC.

1325 ST. ANDREWS DRIVE TAMPA FL 33612  1325 ST. ANDREWS DRIVE TAMPA FL 33612  3. Date Incorporated or Qualified 12/30/1992  3. Date Incorporated or Qualified 12/30/1995  3. Date Incorporated or Qualified 12/30/1995  4. FEI Number Applied For 12/30/1995  Suite, Apt. #, etc.  5. Certificate of Status Desired Fee Required  City & State  City & State  City & State  City & State  28  Country  Country  Country  Country  Country  29  Country  Country  Country  30. Date Incorporated or Qualified 12/30/1995  Applied For Not Applied For 12/30/1995  Sp. 3160385  Sp. 3160385  Not Applied For 12/30/1995  Sp. 3160385  Sp. 3160385  Sp. 3160385  Sp. 3160385  Sp. 3160385  Sp. 3160385  Not Applied For 12/30/1995  Sp. 3160385  Sp. 3						
TAMPA FL 33612   TAMPA FL 33612   TAMPA FL 33612   3. Date incorporated or Qualified   3a. Date of Last Report   12/30/1992   03/16/1995   03/16/16/1995   03/16/16/1995   03/16/16/16/16/16/16/16/16/16/16/16/16/16/	Principal Place of Business Mailing Address				r samines ein saidt istil abili selli	OAILL BOILL BOILL BOILL BOILL BIRIT LOAD 1881
2. Periopal Place of Business   2a. Maling Address   25   34, FEI Number   25   34, FEI Number   25   34, FEI Number   25   350, Apt. #, etc.   27   27   5. Certificate of Status Desired   36, 75 Additional People of City & State   27   28   5. Certificate of Status Desired   36, 75 Additional People of City & State   28   28   5. Certificate of Status Desired   36, 75 Additional People of City & State   28   29   20   20   20   28   5. Certificate of Status Desired   36, 75 Additional People of City & State   36, 75 Additional People				RIVE		
2. Principal Place of Business 2. 2a. Mailing Address 5. Sulte, Apt. #, etc. 2. Sulte, Apt. #, etc. 3. Sulte, Apt.						
Surie, Apt. #, etc.	2 Principal D	long of Business	D. M.S. A. I.			03/16/1995
Suite, Apt. #, etc.    Suite, Apt. #, etc.	<del></del>	lace of business	<u> </u>			+ + · · · · · · · · · · · · · · · · · ·
Cry & State		#. etc.	<del></del>		39-3 100303	
City & State   City & State   City & State   28   28   28   29   20   Country   2p   Country   2		.,	<del></del>		<ol><li>Certificate of Status Desired</li></ol>	
Added to Fees   Added to Fee	City & State	e	<del>                                     </del>		6 Election Campaign Financing	
Zep	23		28			
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  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 as registered agent, or both, in the State of Protrids. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the obligations of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing as registered agent. I am termiter with, and accept the obligations of Sections 617.0503, Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent. I am termiter with, and accept the obligations of Sections 617.0503, Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered of directors. Thereby accept the appointment as registered agent. I am termiter with a statement for the purpose of changing as registered of directors. Thereby accept the appointment as registered of directors. Thereby accept the appointment as registered agent. I am termiter with a statement for the purpose of changing as registered of directors. Thereby accept the appointment as registered of the directors. Thereby	<del></del>	Country	Zip	Country		<u></u> -
MARSHALL, ALAN 1325 ST. ANDREWS DRIVE TAMPA FL 33812  11. Presidenced agent to the provisions of Soctions 617,0502 and 617,1508, Florida Statutes, the above-named corporation autinitis this statement for the purpose of changing its registered office femiliar with, and accept the objection of Soctions 617,0502 and 617,1508, Florida Statutes, the above-named corporation autinitis this statement for the purpose of changing its registered office femiliar with, and accept the objection of Soction 617,0503, Florida Statutes, the above-named corporation autinitis this statement for the purpose of changing its registered office registered agent to both, it was statement as registered office femiliar with, and accept the objection of Socion 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office femiliar with, and accept the objection of Socion 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office femiliar with, and accept the objection of Socion 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office femiliar with, and accept the objection of Socion 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office femiliar with, and accept the objection of Socion 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office femiliar with and accept the objection of Socion 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of the corporation submits this statement for the purpose of changing its registered office of the corporation submits this statement for the purpose of changing its registered office.  12.	24			30		
MARSHALL, ALAN 1325 ST. ANDREWS DRIVE TAMPA FL 33812  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 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 familier with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familier with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE Signature. Byped or presonance of agenteral agent are site if apposable to site if agenciate in the site of agenciate agent are site if agenciate. I am familier with, and accept the obligations of, Section 617.0503, Florida Statutes.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. TITLE  PD DELETE  11. TITLE  P		9. Name and Address of Current	Registered Agent	2.1	10. Name and Address of New Re	gistered Agent
13.25 ST. ANDREWS DRIVE TAMPA FL 33612  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named 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  12. OFFICERS AND DIRECTORS  13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 17.  11TLE  PD				81 Name		
TAMPA FL 33812    B4				82 Street	Address (P.O. Box Number is Not Acceptable	3)
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 cirectors. 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 prefetor name of registered agent was the Facebook part of the purpose of changing its registered office agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or prefetor name of registered agent was the Facebook part of the purpose of changing its registered office agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or prefetor name of registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or prefetor name of registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or prefetor name of registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or prefetor name of registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or prefetor name of registered agent. I am familiar with an accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or prefetor name of registered agent. I am familiar with an accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or prefetor name of registered agent. I am familiar with a signature registered agent. I am familiar with a registered agent. I am familiar with a registered agent. I am familiar with a s				00		
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 officing familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.    SIGNATURE	TAMPA	FL 33612		83		
11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florids 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. Thereby 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 1 applicable   INOTE Registered Agent agriculture required variety accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.    SIGNATURE				84 City		85 Zip Code
TILE PD DELETE 1.3 SIRET ADDRESS 1325 ST. ANDREWS DRIVE 1.3 SIRET ADDRESS 1.3 SIRET	11 Purcuant t	to the provisions of Sections 617 0503	and 617 1600 Florida Phat. to			FL
SIGNATURE   Signature, hyped or printed name of migrature agent and title if applicable   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projectioned Agent agriculture to kind of which revisits from 3   NOTE Projection of kind of the following and the following addition	or register	eo agent, or both, in the State of Fiorid	a. Such change was authorize	ed by the corporation's	orporation submits this statement for the purp board of directors. I hereby accept the appoi	ose of changing its registered office I ntment as registered agent. Lam
Signature, byted or printed registered agent and the if expolatable (INCTE- Registered Agent expirator required when resistating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICETIS AND DIRECTORS IN 12  TITLE  PD  MARSHALL, ALAN  12 MAWE  STREET ADDRESS  CITY-ST-ZIP  TITLE  VD  DELETE  1.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  VD  DELETE  2.1 TITLE  VD  Change Addition  AMME  SNIDER, ROBERT  730 24TH AVENUE NORTH  CITY-ST-ZIP  TITLE  SD  DELETE  3.1 TITLE  SD  DELETE  3.1 TITLE  SD  DELETE  3.2 NAME  3.2 NAME  3.2 NAME  3.3 STREET ADDRESS  ST. PETERSBURG FL 33704  TITLE  DEPEW, CHRISTINA  3.2 NAME  STREET ADDRESS  ST. 2P  SARASOTA FL  TITLE  TD  DELETE  SNIDER, SARAH  STREET ADDRESS  TAMPA FL 33704  4.2 NAME  SNIDER, SARAH  STREET ADDRESS  TAMPA FL 33704  4.2 NAME  SNIDER, SARAH  STREET ADDRESS  TAMPA FL 33704  4.2 NAME  SNIDER, SARAH  STREET ADDRESS  TAMPA FL 33704  4.2 NAME  SNIDER, SARAH  STREET ADDRESS  TAMPA FL 33704  4.2 NAME  SNIDER, SARAH  STREET ADDRESS  TAMPA FL 33704  4.2 NAME  SNIDER, SARAH  STREET ADDRESS  TAMPA FL 33704  4.4 CITY-ST-ZIP  TITLE  DELETE  ST. PETERSBURG FL 33704  Addition  ADDITIONS/CHANGES TO OFFICETIS AND DIFIECTORS IN 12  Addition  Addit	iamiliar Wi	th, and accept the obligations of, Section	on 617.0503, Florida Statutes	•		5
12.	SIGNATURE _	Signature, typed or printed name of registered appents	nd title if applicable (NC)	The Boaicheard Apopt signature		
TITLE	12.					
NAME   MARSHALL, ALAN   12 NAME   13 STREET ADDRESS   1325 ST. ANDREWS DRIVE   13 STREET ADDRESS   14 CITY-ST-ZIP   TAMPA FL 33612   14 CITY-ST-ZIP   TITLE   VD   VI Change   Addition	TITLE	PD	DELETE		The state of the s	
13 STREET ADDRESS   1325 ST. ANDREWS DRIVE   13 STREET ADDRESS   14 CITY-ST-ZIP	NAME	MARSHALL, ALAN		1.2 NAME		
TITLE   VD	STREET ADDRESS			1.3 STREET ADDRESS		
TITLE   VD	CITY-ST-ZIP	TAMPA FL 33612		1.4 CITY - ST - ZIP		
NAME   DEPEW, CHRISTINA   3.2 NAME   3.5 NAME   3.5 NAME   3.2 NAME   3.3 STREET ADDRESS   3.5 STREET ADDRESS   3.4 CITY-SI-ZIP   SARASOTA FL   3.4 CITY-SI-ZIP   TITLE   DELETE   4.1 TITLE   Change   Addition   Additio	TITLE	VD	DELETE	2.1 TITLE	VD	Change
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NAME   DEPEW, CHRISTINA   3.2 NAME   3.5 NAME   3.5 NAME   3.2 NAME   3.3 STREET ADDRESS   3.5 STREET ADDRESS   3.4 CITY-SI-ZIP   SARASOTA FL   3.4 CITY-SI-ZIP   TITLE   DELETE   4.1 TITLE   Change   Addition   Additio	CITY-ST-2IP	ST. PETERSBURG FL 33704		2 4 CITY-ST-ZIP	SARASOTA, FL.	
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TITLE         TD         DELETE         4 1 TITLE         Change         Addition           NAME         SNIDER, SARAH         4.2 NAME         4.2 NAME         4.3 STREET ADDRESS         5.1 TITLE         4.4 CITY-ST-ZIP         4.4 CITY-ST-ZIP         5.1 TITLE         Change         Addition           NAME         5.2 NAME         5.2 NAME         Addition         Addition	STREET ADDRESS			3.3 STREET ADDRESS		
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AND THE PROPERTY OF THE PROPER						
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14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(20) A Florida State of	14. I do hereby	certify that the information supplied wi	th this filing is voluntarily furni	shed and does not qua	lify for the exemption stated in Section 119 07	'(3)/k), Florida Statutes, Uturther
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 manged, or on an attachment with an address.	oath; that I	the information indicated on this annual am an officer or director of the corpora	report or supplemental annu ition or the receiver or trustee	ial report is true and ac empowered to execute	curate and that my cionature chall have the co	and local offect on it made under

SIGNATURE: Marshall ALAN D. MARSHAll 2-9-96 813-933-2089
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Date Date Description of the Director District Di