

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005407

FILED
Apr 15, 2009
Secretary of State

Entity Name: CORVETTE CLUB OF ORLANDO, INC.

Current Principal Place of Business:

9107 PANZANI PLACE
WINDERMERE, FL 34786

New Principal Place of Business:

718 GARDEN VIEW ST.
DAVENPORT, FL 33897

Current Mailing Address:

9107 PANZANI PLACE
WINDERMERE, FL 34786

New Mailing Address:

718 GARDEN VIEW ST
DAVENPORT, FL 33897

FEI Number: 59-3213989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOSTRO, MICHAEL R
9107 PANZANI PLACE
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

KING, SUSAN E
718 GARDEN VIEW ST.
DAVENPORT, FL 33897 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: SUSAN E. KING

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: NOSTRO, MICHAEL R
Address: 9107 PANZANI PLACE
City-St-Zip: WINDERMERE, FL 34786

Title: DV () Delete
Name: GRANT, THOMAS
Address: 2441 SOUTHERN HILLS COURT
City-St-Zip: OVIEDO, FL 32765

Title: DT () Delete
Name: KING, SUSAN
Address: 718 GARDEN VIEW STREET
City-St-Zip: DAVENPORT, FL 33897

Title: DV () Delete
Name: WELLS, CHRIS
Address: 6123 RANIER DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: DS () Delete
Name: WELLONS, GEORGIA
Address: P.O. BOX 574973
City-St-Zip: ORLANDO, FL 32857

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: KING, SUSAN E
Address: 718 GARDEN VIEW ST.
City-St-Zip: DAVENPORT, FL 33897

Title: PRES (X) Change () Addition
Name: NOSTRO, MICHAEL R
Address: 9107 PANZANI PLACE
City-St-Zip: WINDERMERE, FL 34786

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

Title: DV (X) Change () Addition
Name: IANITELLI, DON
Address: 1010 BONITA DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: () Change () Addition
Name:
Address:
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: SUSAN E. KING

DT

04/15/2009

Electronic Signature of Signing Officer or Director

Date