

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

APPROVED
AND
FILED

97 SEP 30 AM 10:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000001912 (4)**

1. Corporation Name

PLANTATION JEEP CLUB, INC.

Principal Place of Business

Mailing Address

**5201 SW 88 TERRACE
COOPER CITY FL 33328**

**5201 SW 88 TERRACE
COOPER CITY FL 33328**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/15/1994

3a. Date of Last Report
07/23/1996

4. FEI Number
NOT APPLICABLE

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business
21 **13621 S.W. 36 Court**

2a. Mailing Address
26 **13621 S.W. 36 Court**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 **DAVIE - FL.**

28 **DAVIE - FL**

24 **33330**

29 **33330**

9. Name and Address of Current Registered Agent

**BLANCO, JOSEPH
5201 SW 88 TERRACE
COOPER CITY FL 33328**

10. Name and Address of New Registered Agent

81 Name **JOHN E. AURIEMMA**
82 Street Address (P.O. Box Number is Not Acceptable)
13621 SW 36 COURT
83
84 City **DAVIE** State Code **FL** Zip Code **33330**

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 **JOHN E. AURIEMMA**

(NOTE: Registered Agent signature required when reinstating)

DATE **9-3-97**

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **BLANCO, JOSEPH**
STREET ADDRESS **5201 SW 88 TERRACE**
CITY-ST-ZIP **COOPER CITY FL 33328**

TITLE **D** ☐ DELETE
NAME **CROSSEN, KELLY**
STREET ADDRESS **8088 S.W. 29 PL.**
CITY-ST-ZIP **DAVIE FL 33314**

TITLE **D** ☐ DELETE
NAME **LICOLLI, LISA**
STREET ADDRESS **5201 SW 88 TERR**
CITY-ST-ZIP **COOPER CITY FL 33328**

TITLE **DT** ☐ DELETE
NAME **KAYE, MARTY**
STREET ADDRESS **15895 S. DIXIE HWY.**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **T** ☐ DELETE
NAME **MUTINELLI, RENEE**
STREET ADDRESS **5201 SW 88 TER**
CITY-ST-ZIP **COOPER CITY FL 33328**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **(PD)** ☒ Change ☐ Addition
1.2 NAME **JOHN E. AURIEMMA**
1.3 STREET ADDRESS **13621 S.W. 36 Court**
1.4 CITY-ST-ZIP **DAVIE FL 33330**

2.1 TITLE **(D)** ☒ Change ☐ Addition
2.2 NAME **VICE PRES.**
2.3 STREET ADDRESS **HOWARD LANE**
2.4 CITY-ST-ZIP **19700 S.W. 14 Street**
Pembroke Pines FL 33029

3.1 TITLE **(D)** ☒ Change ☐ Addition
3.2 NAME **SECRETARY**
3.3 STREET ADDRESS **JOSEPH HERZOG**
3.4 CITY-ST-ZIP **5731 S.W. 53 TERR**
DAVIE FLA 33314

4.1 TITLE **(T)** ☒ Change ☐ Addition
4.2 NAME **TREASURER**
4.3 STREET ADDRESS **MIKE MATHWICK**
4.4 CITY-ST-ZIP **887 OLEANDER DRIVE**
PLANTATION 33317

5.1 TITLE **(D, T)** ☒ Change ☐ Addition
5.2 NAME **MARTY KAYE**
5.3 STREET ADDRESS **15895 S. DIXIE HWY**
5.4 CITY-ST-ZIP **MIAMI - FL 33157**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: **JOHN E. AURIEMMA**

SIGNATURE REQUIRED **President**

9/3/97

**305
6239844**

CR2E037 (4/97)