

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 03, 2002 8:00 am
Secretary of State

02-03-2002 90031 049 ****61.25

DOCUMENT # N96000000720

1. Entity Name

THE WANDERERS CAR CLUB, INC.

Principal Place of Business

Mailing Address

2105 SW 87 PL
DUNNELLON FL 34431

P OBOX 103
HERNANDO FL 34442-0103

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3344852

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOLSNER, ROSE J
21015 SW 87 PLACE
DUNNELLON FL 34431

Name

MARSHALL E. EARNEST

Street Address (P.O. Box Number is Not Acceptable)

6 NORTH BEST POINT

City

INVERNESS

FL

Zip Code

34450

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/15/2002

FILE NOW: FEE \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME GOLSNER, ROSE J
STREET ADDRESS 21015 SW 87 PL
CITY-ST-ZIP DUNNELLON FL 34431

☒ Delete

TITLE VP
NAME HINRICH, BOB
STREET ADDRESS 5489 S ASHLEY TER
CITY-ST-ZIP INVERNESS FL 34452

☒ Delete

TITLE D
NAME LUNDELINS, WALT
STREET ADDRESS 9946 NW 49 TERR.
CITY-ST-ZIP MIAMI FL 33178-1918

☐ Delete

TITLE T
NAME SAVELA, KAREN
STREET ADDRESS 5532 S. AHLEY TERR
CITY-ST-ZIP INVERNESS FL 34452

☒ Delete

TITLE S
NAME DETOMASI, CHRIS
STREET ADDRESS 5454 S CONCORD TER
CITY-ST-ZIP INVERNESS FL 34452

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE PD
NAME LUMPKINS, JEWELL
STREET ADDRESS 3327 N. CARL GROSE HWY.
CITY-ST-ZIP HERNANDO FL 34452

☐ Change ☒ Addition

TITLE VPD
NAME MORROW, BOB
STREET ADDRESS 1368 W. MINERAL CT
CITY-ST-ZIP HERNANDO FL 34452

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE TD
NAME EARNEST, MARSHALL E
STREET ADDRESS 6 N. BEST POINT
CITY-ST-ZIP INVERNESS, FL 34450

☐ Change ☒ Addition

TITLE SD
NAME BROWN, CONNIE
STREET ADDRESS 8740 E LARLAN CT.
CITY-ST-ZIP INVERNESS, FL 34450

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/15/02 3526373139

CR2E037 (9/01)