

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000586

FILED
Feb 05, 2009
Secretary of State

Entity Name: ANTIQUE AUTOMOBILE CLUB OF AMERICA (CENTRAL FLORIDA REGION), INC.

Current Principal Place of Business:

1215 GUERNSEY ST
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

1215 GUERNSEY ST
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-3525728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAHAFFEY, JOHN D JR, ESQ
3438 LAWTON ROAD
SUITE 200
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: COLE, LARRY
Address: 1322 SWEETBRIAR RD.
City-St-Zip: ORLANDO, FL 32806

Title: SD () Delete
Name: ROY, MARILYN
Address: 81 SOUTH EDGEMON
City-St-Zip: WINTER SPRINGS, FL 32708

Title: PD () Delete
Name: GILKES, HOWARD
Address: 1215 GUERNSEY ST.
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: HOLT, TOM
Address: 808 WINDERGROVE CT.
City-St-Zip: OCOEE, FL 34761

Title: TD () Delete
Name: MCMULLEN, BOB
Address: 1448 HIDDEN MEADOW WAY
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: MORRIS, BILL
Address: 24719 KINGDOM COURT
City-St-Zip: SORRENTO, FL 32776

Title: SD (X) Change () Addition
Name: ROY, MARILYN
Address: 81 SOUTH EDGEMON AV
City-St-Zip: WINTER SPRINGS, FL 32708

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

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

Title: TD (X) Change () Addition
Name: ALLEN, DON
Address: 153 POE DRIVE, SE
City-St-Zip: WINTER HAVEN, FL 33884

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: HOWARD E. GILKES

PD

02/05/2009

Electronic Signature of Signing Officer or Director

Date