

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90094 015 ****61.25

DOCUMENT # N98000000528

1. Entity Name
CHARLOTTE SPORT MODELERS SOCIETY, INC.



Principal Place of Business
4205 ALMAR DR
PUNTA GORDA, FL 33950

Mailing Address
4205 ALMAR DR
PUNTA GORDA, FL 33950

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102007 Chg-NP CR2E037 (12/06)

4. FEI Number
NOT APPLICABLE

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

BLAKE-HASKINS, JOHN C
4205 ALMAR DRIVE
PUNTA GORDA, FL 33950

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME GRUENNERT, BOB
STREET ADDRESS 468 WABASH TERR
CITY-ST-ZIP PORT CHARLOTTE, FL 33954

TITLE VPD ☐ Delete
NAME CRTMAYER, DAVID A
STREET ADDRESS 356 MORGAN ST
CITY-ST-ZIP PUNTA GORDA, FL 33983

TITLE S ☐ Delete
NAME BLAKE-HASKINS, JOHN C
STREET ADDRESS 4205 ALMAR DR
CITY-ST-ZIP PUNTA GORDA, FL 33950

TITLE T ☐ Delete
NAME LINES, DAN
STREET ADDRESS 930 SANTA BRIGIDA CT.
CITY-ST-ZIP PUNTA GORDA, FL 33950

TITLE BMD ☐ Delete
NAME DEUTSCH, JIM
STREET ADDRESS 25442 ST. HELENA LN
CITY-ST-ZIP PUNTA GORDA, FL 33983

TITLE BMD ☐ Delete
NAME STITELER, FRED
STREET ADDRESS 131 LEYENNE
CITY-ST-ZIP PUNTA GORDA, FL 33983

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME CONLON, MICHAEL
STREET ADDRESS 2904 CABARET AVE
CITY-ST-ZIP PORT CHARLOTTE, FL 33948

TITLE VPD ☒ Change ☐ Addition
NAME HOLMES, MAX
STREET ADDRESS 26044 QUITO DRIVE
CITY-ST-ZIP PORT CHARLOTTE, FL 33983

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE BMD ☒ Change ☐ Addition
NAME HARE, WILLIAM
STREET ADDRESS 4217 ALMAR DRIVE
CITY-ST-ZIP PUNTA GORDA, FL 33950

TITLE BMD ☒ Change ☐ Addition
NAME DUNLAP, JOHN
STREET ADDRESS 2196 ZOYDER TERR
CITY-ST-ZIP NORTH PORT, FL 34286

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *John C. Blake-Haskins - SECRETARY, CSMS 1/10/07*