2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002487

FILED Mar 22, 2005 Secretary of State

Entity Name: ANTIQUE AUTOMOBILE CLUB OF AMERICA - RICHEY REGION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
	SINA DRIVE RT RICHEY, FI	_ 34654			
Current Mailing Address:			New Maili	New Mailing Address:	
	SINA DRIVE RT RICHEY, FI	_ 34654			
FEI Number	r: 59-2345303	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent	: Name and	Address of New Registered Agent:	
	SNA DR RT RICHEY, FI		he purpose of changing	its registered office or registered agent, or both,	
in the Stat	e of Florida.			ne regionerou emos er regionerou agem, er bean,	
SIGNATU		nic Signature of Registered	Agent	Date	
ů ů			· ·		
OFFICER	S AND DIREC	TORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	COOK, JAMES 8811 CESSNA		Title: Name: Address: City-St-Zip:	P (X) Change () Addition WALKER, JOHN G 13628 LANDERS DRIVE HUDSON, FL 34667	
Title: Name: Address: City-St-Zip:	V (WALKER, JOH 13628 LANDEI HUDSON, FL	RS DR	Title: Name: Address: City-St-Zip:	V (X) Change () Addition COOK, JAMES A 8811 CESSNA DRIVE NEW PORT RICHEY, FL 34654	
Title: Name: Address: City-St-Zip:	T (HAMIL, JUANIT 9714 REX ST HUDSON, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	S (REISDORPH, : 10272 RAMBU		Title: Name: Address:	() Change () Addition	
Name: Address: City-St-Zip:	SPRING HILL,		City-St-Zip:		
Address:	SPRING HILL,	FL 34608) Delete WHEEL LN	City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN G. WALKER P 03/22/2005