

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2007 8:00 am
Secretary of State

02-21-2007 90026 039 ****61.25

DOCUMENT # N98000004504

1. Entity Name

NORTH FLORIDA ANTIQUE ENGINE ASSOCIATION INC.



Principal Place of Business

Mailing Address

121 ODOM RD
PALATKA FL 32177

121 ODOM RD
PALATKA FL 32177



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/06)

Zip

Country

Zip

Country

4. FEI Number

59-3550878

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

ARCHIBALD, PATRICIA
121 ODOM RD
PALATKA FL 32177

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

**FILE NOW: 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME SIVERT, WILLIAM
STREET ADDRESS 1910 SE 170TH AVE.
CITY-ST-ZIP SILVER SPRINGS FL 34488

TITLE ☐ Change ☒ Addition
NAME GLEN LESNETT
STREET ADDRESS 3114 STRAWBERRY LANE
CITY-ST-ZIP LAKELAND, FL 33801

TITLE VP ☒ Delete
NAME ARCHIBALD, KAYE
STREET ADDRESS 121 ODOM RD
CITY-ST-ZIP PALATKA FL 32-1779

TITLE ☒ Change ☐ Addition
NAME V.P. RELL BENNETT
STREET ADDRESS 7259 E 69th LANE
CITY-ST-ZIP TRENTON, FL 32693

TITLE D ☐ Delete
NAME SMITH, KENNETH
STREET ADDRESS PO BOX 1123
CITY-ST-ZIP HAWTHORNE FL 32640

TITLE ☒ Change ☐ Addition
NAME KAYE ARCHIBALD
STREET ADDRESS 121 Odom Rd.
CITY-ST-ZIP PALATKA, FL 32177

TITLE D ☐ Delete
NAME DILKES, ROBERT
STREET ADDRESS 16750 SE 95TH ST. RD.
CITY-ST-ZIP OCKLAWAHA FL 32179

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

TITLE PD ☒ Delete
NAME KENT, R.F.
STREET ADDRESS 2032 NE 118TH AVE. RD.
CITY-ST-ZIP SILVER SPRINGS FL 34488

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

TITLE SD ☐ Delete
NAME ARCHIBALD, PATRICIA
STREET ADDRESS 121 ODOM RD.
CITY-ST-ZIP PALATKA FL 32177

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Patricia E. Archibald* PATRICIA E. ARCHIBALD 2/12/07 386-328-9498
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #