

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002445

1. Entity Name

TROPICAL SPORTS CAR CLUB, INC.

**FILED**  
**May 30, 2000 8:00 am**  
**Secretary of State**

05-30-2000 90048 048 \*\*\*\*61.25

Principal Place of Business

938 CAMELLIA DRIVE  
ROYAL PALM BEACH FL 3466

Mailing Address

938 CAMELLIA DRIVE  
ROYAL PALM BEACH FL 33411-3466

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

33411-3466

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1006551

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

DORSEY, STEVEN M  
938 CAMELLIA DRIVE  
ROYAL PALM BEACH FL 3466

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

33411-3466

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

**FILE NOW:**  
**FEE IS \$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

TITLE D ☐ Delete  
NAME GOLDTRAP, RIC  
STREET ADDRESS 4121 NE 26 TERRACE  
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

TITLE D ☒ Delete  
NAME SKANTAR, GARY  
STREET ADDRESS 11000 NW 24 STREET  
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE D ☒ Delete  
NAME DOBKIN, RANDY  
STREET ADDRESS 1060 SW 20 STREET  
CITY-ST-ZIP BOCA RATON FL 33486

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition  
NAME Don Sowler  
STREET ADDRESS 1104-L Goldenrod Road  
CITY-ST-ZIP Wellington, FL 33414

TITLE D ☐ Change ☒ Addition  
NAME Steve Dorsey  
STREET ADDRESS 938 Camellia Drive  
CITY-ST-ZIP Royal Palm Beach, FL 33411-3466

TITLE P ☐ Change ☒ Addition  
NAME David Haevserrmann  
STREET ADDRESS 1637 Cypress Pointe Drive  
CITY-ST-ZIP Coral Springs, FL 33071

TITLE ☒ Change ☒ Addition  
NAME Steve Torp  
STREET ADDRESS 1041 NW 4 street  
CITY-ST-ZIP Boca Raton, FL 33486

TITLE T ☐ Change ☒ Addition  
NAME Holly Ferguson  
STREET ADDRESS 4121 NE 26 Terrace  
CITY-ST-ZIP Lighthouse Point, FL 33064

TITLE S ☐ Change ☒ Addition  
NAME Ann Torp  
STREET ADDRESS 1041 NW 4 street  
CITY-ST-ZIP Boca Raton, FL 33486

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 Required*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561-479-1237

CR2E037 (9/99)