2002 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 22, 2002 8:00 am Secretary of State **DOCUMENT # 766679** 1. Entity Name SUNSHINE STATE BMX ASSOCIATION, INC. 03-22-2002 90021 004 ****70.00 Mailing Address Principal Place of Business C/O BECKY SZASZ C/O BECKY SZASZ 231 E LAKESHORE DR 231 E LAKESHORE DR KISSIMMEE FL 34744 KISSIMMEE FL 34744 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-0196975 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BIXLER, ALICE M. 7318 PALOMINO PL. SARASOTA FL 34241 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 **Department of State** Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition TITLE ☐ Delete TITLE PINGOL, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 7805 PENWOOD CT CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE PINGOL, LAURA NAME NAME 7805 PENWOOD CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKEWORTH FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE SZASZ, BECKY NAME NAME 231 E LAKESHORE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP--KISSIMMEE FL 34744 ☐ Change ☐ Addition SRCD TITLE ☐ Delete TITLE NAME BIXLER, ALICE NAME STREET ADDRESS STREET ADDRESS 7318 PALOMINO PL. CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL Change Addition TITI F ☐ Delete TITLE NAME Kania, Jeff NAME STREET ADDRESS STREET ADDRESS 2004 POLO CLUB DR APT 202 CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL 34741 Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.