

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2004 08:00 AM
Secretary of State

DOCUMENT # 766679

1. Entity Name

SUNSHINE STATE BMX ASSOCIATION, INC.



Principal Place of Business

C/O BECKY SZASZ
231 E LAKESHORE DR
KISSIMMEE FL 34744
US

Mailing Address

C/O BECKY SZASZ
231 E LAKESHORE DR
KISSIMMEE FL 34744
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-0196975

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

BIXLER, ALICE M.
7318 PALOMINO PL.
SARASOTA FL 34241

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, 2004

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 NAME	P PINGOL, JOHN	☐ Delete
STREET ADDRESS	7805 PENWOOD CT	
CITY - ST - ZIP	LAKE WORTH FL	
TITLE NAME	SD PINGOL, LAURA	☐ Delete
STREET ADDRESS	7805 PENWOOD CT	
CITY - ST - ZIP	LAKE WORTH FL	
TITLE NAME	T SZASZ, BECKY	☐ Delete
STREET ADDRESS	231 E LAKESHORE DR	
CITY - ST - ZIP	KISSIMMEE FL 34744	
TITLE NAME	SHCD BIXLER, ALICE	☐ Delete
STREET ADDRESS	7318 PALOMINO PL.	
CITY - ST - ZIP	SARASOTA FL	
TITLE NAME	V SZASZ, JAMES	☐ Delete
STREET ADDRESS	231 E LAKESHORE BLVD	
CITY - ST - ZIP	KISSIMMEE FL 34744	
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY - ST - ZIP		

TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS	U000000073701	
CITY - ST - ZIP	03/02/04-80046-023 70.00	
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY - ST - ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY - ST - ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY - ST - ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
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.

SIGNATURE:

Rebecca J. Szasz **Rebecca J. SZASZ - Treasurer** 2-26-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

407-348-0774

Daytime Phone #