


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # N04000002643

1. Entity Name
SOUTHERN OCEAN RACING CONFERENCE, INC.



Principal Place of Business
1374 SE 14 ST
FT LAUDERDALE, FL 33316

Mailing Address
1374 SE 14 ST
FT LAUDERDALE, FL 33316

DO NOT WRITE IN THIS SPACE



01042007 No Chg-NP CR2E037 (4/06)

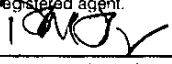
| | |
|---|---------------------------------------|
| 4. FEI Number 20-0926221 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

MEAGHER, ROBERT J JR
1374 SE 14 ST
FT LAUDERDALE, FL 33316

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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:  DATE: **1/24/07**

Signature, typed or printed name of registered agent and filer, if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007


9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DST MEAGHER, ROBERT J JR 1374 SE 14 ST FT LAUDERDALE, FL 33316 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP GILLETTE, DENNIS 2000 S OCEAN LN FT LAUDERDALE, FL 33316 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BATZER, KEN 2765 NE 22 AVE LIGHTHOUSE POINT, FL 33064 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BOWIE, JOEL 700 ELM TREE LN BOCA RATON, FL 33484 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MEAGHER, ROBERT J III 800 SW 16 CT FT LAUDERDALE, FL 33315 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MILLER, TIM 530 S FEDERAL HWY FT LAUDERDALE, FL 33316 |

U00000619011
 02/08/07-80054-020 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:  DATE: **1/24/07** 954-763-6621

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day to Phone