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Mar 07 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N96000000886 (9)

1. Corporation Name

ASTRO TECH RACE TEAM, INC.



Principal Place of Business

Mailing Address

102 S SINGLETON AVENUE  
TITUSVILLE FL 32796

102 S SINGLETON AVENUE  
TITUSVILLE FL 32796-3019

3. Date Incorporated or Qualified  
02/16/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-336-5040

Applied For

Not Applicable

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

6. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LACOEY, JIM  
102 S SINGLETON AVENUE  
TITUSVILLE FL 32796

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-12-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  DELETE  
NAME LACOEY, JIM  
STREET ADDRESS 102 S SINGLETON AVENUE  
CITY-ST-ZIP TITUSVILLE FL 32796

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME EASLEY, ANGIE  
STREET ADDRESS 1713 FORD ROAD  
CITY-ST-ZIP MIMS FL 32754

2.1 TITLE  Change  Addition  
2.2 NAME ALICE M. La Coy  
2.3 STREET ADDRESS 102 S. SINGLETON AVE  
2.4 CITY-ST-ZIP TITUSVILLE FL 32796

TITLE D  DELETE  
NAME DODD, LEE  
STREET ADDRESS 1785 COWAN DRIVE  
CITY-ST-ZIP TITUSVILLE FL 32796

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: JIM LACOEY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-97

Date

407-264-3000

Daytime Phone # 0015889

CR2E037 (9/96)