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Feb 04 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000004842 (7)
1. Corporation Name

THE UNITED STATES QUAD RUGBY ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5861 WHITE CYPRESS DRIVE LAKE WORTH FL 33467	5861 WHITE CYPRESS DRIVE LAKE WORTH FL 33467

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified	08/25/1997
4. FEI Number	36-3648503
Applied For	Not Applicable
5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	☒ Yes ☒ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	☐ Yes ☒ No

9. Name and Address of Current Registered Agent
BISHOP, JOHN 5861 WHITE CYPRESS DRIVE LAKE WORTH FL 33467

10. Name and Address of New Registered Agent
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] TREASURER [Signature] DATE 1/8/98

12. OFFICERS AND DIRECTORS	
TITLE	NAME
NAME	STREET ADDRESS
CITY-ST-ZIP	
TITLE	NAME
NAME	STREET ADDRESS
CITY-ST-ZIP	
TITLE	NAME
NAME	STREET ADDRESS
CITY-ST-ZIP	
TITLE	NAME
NAME	STREET ADDRESS
CITY-ST-ZIP	
TITLE	NAME
NAME	STREET ADDRESS
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	Commissioner
1.2 NAME	Brad Mikkelsen
1.3 STREET ADDRESS	1329 S. Logan Street
1.4 CITY-ST-ZIP	Denver, CO 80210
2.1 TITLE	Ed Suhr - President
2.2 NAME	3340 E. Morrison Apt. 380
2.3 STREET ADDRESS	Portland, OR 97214
2.4 CITY-ST-ZIP	718 998 8259
3.1 TITLE	Dan McCauley - V. President
3.2 NAME	2801 Rioja
3.3 STREET ADDRESS	San Clemente, CA 92673
3.4 CITY-ST-ZIP	714 361-2239
4.1 TITLE	Judy Pfiester - Secretary
4.2 NAME	309 Stoney Ford Road
4.3 STREET ADDRESS	Holland, PA 18966
4.4 CITY-ST-ZIP	215-504-0443
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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:

SIGNATURE REQUIRED

[Signature] 1/8/98 561-969-1970

CR2E037 (10/97)