

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752264

Entity Name: CAPE CORAL BMX ASSOCIATION, INC.**Current Principal Place of Business:**1410 SW 6TH PLACE
CAPE CORAL, FL 33991**Current Mailing Address:**P.O. BOX 151421
CAPE CORAL, FL 33915**FEI Number:** 65-0691130**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ZIOMEK, JEFFREY
11962 ROYAL TEE CIRCLE
CAPE CORAL, FL 33991 US*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:** JEFFREY ZIOMEK

04/05/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TRACK DIRECTOR
Name ROSENQUIST, KEVIN
Address P.O. BOX 151421
City-State-Zip: CAPE CORAL FL 33915

Title CLERK OF COURSE
Name ROSENQUIST, ALEXIS
Address P.O. BOX 151421
City-State-Zip: CAPE CORAL FL 33915

Title SECRETARY
Name JONES, JILL
Address P.O. BOX 151421
City-State-Zip: CAPE CORAL FL 33915

Title TREASURER
Name ZIOMEK, JEFFREY
Address 11962 ROYAL TEE CIRCLE
City-State-Zip: CAPE CORAL FL 33991

Title PUBLIC AFFAIRS
Name FONOCH, CHANTELL
Address P.O. BOX 151421
City-State-Zip: CAPE CORAL FL 33915

Title PRESIDENT
Name CALDWELL, WILLIAM
Address P.O. BOX 151421
City-State-Zip: CAPE CORAL FL 33915

Title VP
Name JONES, SUSAN
Address P.O. BOX 151421
City-State-Zip: CAPE CORAL FL 33915

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY ZIOMEK

TREASURER

04/05/2017

Electronic Signature of Signing Officer/Director Detail

Date