

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 04, 1999 8:00 am  
Secretary of State

03-04-1999 90129 029 \*\*\*\*61.25

DOCUMENT # 770852

1. Corporation Name

CORAL SPRINGS BMX ASSOCIATION, INC.

Principal Place of Business

10000 NW 29TH ST  
CORAL SPRINGS FL 33075

Mailing Address

P.O. BOX 9802  
CORAL SPRINGS FL 33075



2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

3. Date Incorporated or Qualified

10/20/1983

4. FEI Number

59-2399385

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

□

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

LOUD, HENRY  
8231C THAMES BLVD  
BOCA RATON FL 33433

10. Name and Address of New Registered Agent

81

Name

FAORO, JERRY

82

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

2347 NW 97 LANE

83

City

CORAL SPRINGS

FL

85

Zip Code

33065

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]*

JERRY FAORO / PRESIDENT

DATE

2/11/99

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETE
NAME	LOUD, HENRY	
STREET ADDRESS	8231C THAMES BLVD	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	SD	DELETE
NAME	ROSS, WENDY	
STREET ADDRESS	320 SW 81 TERR.	
CITY-ST-ZIP	FT LAUDERDALE FL 33068	
TITLE	TD	DELETE
NAME	CHINLOY, IAN	
STREET ADDRESS	10708 WILES ROAD	
CITY-ST-ZIP	CORAL SPRINGS FL 33076	
TITLE	DVP	DELETE
NAME	EATON, RANDY	
STREET ADDRESS	1499 SW 9TH ST	
CITY-ST-ZIP	SUNRISE FL	
TITLE	T	DELETE
NAME	BROOK, VICTORIA	
STREET ADDRESS	284 NW 40TH TERR	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	Change	Addition
1.2 NAME	FAORO, JERRY		
1.3 STREET ADDRESS	2347 NW 97 LANE		
1.4 CITY-ST-ZIP	CORAL SPRINGS FL 33065		
2.1 TITLE	JACKSON, JILL	Change	Addition
2.2 NAME			
2.3 STREET ADDRESS	1919 SW 33RD AVENUE		
2.4 CITY-ST-ZIP	FORT LAUDERDALE FL 33312		
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE	PECORINO, GREG	Change	Addition
4.2 NAME			
4.3 STREET ADDRESS	22890 SW 65TH AVE APT-B		
4.4 CITY-ST-ZIP	BOCA RATON FL 33428		
5.1 TITLE	ROSS, WENDY	Change	Addition
5.2 NAME			
5.3 STREET ADDRESS	320 SW 81 TERRACE		
5.4 CITY-ST-ZIP	NORTH LAUDERDALE, FL 33068		
6.1 TITLE		Change	Addition
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, with all other like empowered.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED TD 2/12/99 (954) 341-3095

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)