2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770852

Apr 30, 2004 Secretary of State

Entity Name: CORAL SPRINGS BMX ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 10000 NW 29TH ST CORAL SPRINGS, FL 33075 **Current Mailing Address: New Mailing Address:** P.O. BOX 9802 CORAL SPRINGS, FL 33075 FEI Number: 59-2399385 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FAORO, JERRY 2347 NW 97 LANE CORAL SPRINGS, FL 33065 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete FAORO, JERRY Name: Name: 2347 NW 97TH LANE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: Title: Title: () Delete () Change () Addition Name: ROSS, WENDY Name: Address: 320 SW 81 TERR. Address: City-St-Zip: FT LAUDERDALE, FL 33068 City-St-Zip: Title: () Delete Title: () Change () Addition CHINLOY, IAN Name: Name: Address: 10718 WILES ROAD Address: City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: Title: DVP Title: DVP (X) Change () Addition () Delete Name: LEVITT, BOB Name: ROSENBERG, EVAN Address: P.O. BOX 9802 Address: P.O. BOX 9802 CORAL SPRINGS, FL 33065 City-St-Zip: City-St-Zip: CORAL SPRINGS, FL 33065 Title: () Delete Title: () Change () Addition CHINLOY, VICTORIA Name: Name: 7615 NW 68TH TERR Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: Title: () Delete Title: () Change () Addition BROOK, KARIE Name: Name: Address: 284 N.W. 40TH TERRACE Address: DEERFIELD BEACH, FL 33442 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: IAN CHIN LOY TD 04/30/2004