

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002672

FILED
Feb 22, 2011
Secretary of State

Entity Name: SOUTHERN OFF-ROAD BICYCLE ASSOCIATION, INC.

Current Principal Place of Business:

2125 ELACHEE DR
GAINESVILLE, GA 30504

New Principal Place of Business:

Current Mailing Address:

2125 ELACHEE DR
GAINESVILLE, GA 30504

New Mailing Address:

FEI Number: 58-2271785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, KEN
213 CREST
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

LAMB, JOHN T
1521 DUNNS LAKE DR EAST
JACKSONVILLE, FL 32218 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: JOHN T LAMB

02/22/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: SAURET, THOMAS J
Address: 2125 ELACHEE DR
City-St-Zip: GAINESVILLE, GA 30504

Title: S
Name: CORWINE, RENEE MARTINEZ
Address: 2125 ELACHEE DRIVE
City-St-Zip: GAINESVILLE, GA 30504

Title: T
Name: ALLEN, ANGELA
Address: 2125 ELACHEE DRIVE
City-St-Zip: GAINESVILLE, GA 30504

Title: P
Name: GRIECO, BOB
Address: 2125 ELACHEE DRIVE
City-St-Zip: GAINESVILLE, GA 30504

Title: ACTG
Name: WOOD, KATHY
Address: 2125 ELACHEE DRIVE
City-St-Zip: GAINESVILLE, GA 30504

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: KATHY WOOD

ACTG

02/22/2011

Electronic Signature of Signing Officer or Director

Date