

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2004 8:00 am
Secretary of State

04-02-2004 90036 011 ***158.75

DOCUMENT # K93298

1. Entity Name
**SOUTHEASTERN MINIATURE PYLON RACING ASSOC.,
CORP.**



Principal Place of Business
**1512 S. GREENLEAF CT.
WINTER SPRINGS, FL 32708 US**

Mailing Address
**1512 S. GREENLEAF CT.
WINTER SPRINGS, FL 32708 US**



2. Principal Place of Business

2115 Manor Dr NE

3. Mailing Address

3863 Peacock Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03052004

Chg-P

CR2E034 (10/03)

City & State

Palm Bay, Florida

City & State

Melbourne, Florida

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

32905

Country

US

Zip

32905

Country

US

5. Certificate of Status Desired

☒ **\$8.75 Additional**

Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THOMAS A. BOGUT
3863 PEACOCK DR
MELBOURNE, FL 32904**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/24/04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **FREEMAN, GARY**
STREET ADDRESS **1005 TAPROOT DRIVE**
CITY-ST-ZIP **WINTER SPRINGS, FL 32708**

TITLE **D** ☐ Delete
NAME **BOGUT, THOMAS**
STREET ADDRESS **3863 PEACOCK DR**
CITY-ST-ZIP **MELBOURNE, FL 32904**

TITLE **P** ☐ Delete
NAME **TELFORD, CLIFF**
STREET ADDRESS **1512 S. GREENLEAF CT.**
CITY-ST-ZIP **WINTER SPRINGS, FL 32708**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☐ Change ☒ Addition
NAME **Thomas Dobyns Jr.**
STREET ADDRESS **2115 Manor Dr NE**
CITY-ST-ZIP **Palm Bay, FL 32905**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Director** ☒ Change ☐ Addition
NAME **Cliff Telford**
STREET ADDRESS **1512 S Greenleaf Ct**
CITY-ST-ZIP **Winter Springs, FL 32708**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/04

Date

Daytime Phone #

321-674-3866