

2002 UNIFORM BUSINESS REPORT (UBR)

4/31

FILED
May 29, 2002 8:00 am
Secretary of State

04-30-2002 90137 015 ****50.00

DOCUMENT # L00000014546

1. Entity Name

TAMPA BAY CHAMPIONSHIP RODEO, LLC

Principal Place of Business

9633 HANDCART ROAD
 DADE CITY FL 33525

Mailing Address

9633 HANDCART ROAD
 DADE CITY FL 33525

86982

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

GRAHAM, WILLIAM B
215 S. MONROE STREET, SUITE 600
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

Thomas N Lange

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

9633 Handcart Rd

City

Dade City, FL

FL

Zip Code

33525

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.

SIGNATURE

Thomas N LANGE

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

(NOTE: Registered Agent signature required when reinstating)

4.19.02

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE **OWNER** ☐ Delete
 NAME **THOMAS N. LANGE**
 STREET ADDRESS **9633 HANDCART ROAD**
 CITY-STATE-ZIP **DADE CITY FL 33525**

10. ADDITIONS/CHANGES

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Delete
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 CITY-STATE-ZIP

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE REQUIRED

4.19.02

352 588 4637

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
ATLANTA GA 39901

Attachment 8987
DATE OF THIS NOTICE: 14-20-2000
NUMBER OF THIS NOTICE: CP 575 A
EMPLOYER IDENTIFICATION NUMBER: 59-3680963
FORM: SS-4
0716802808 B

TAMPA BAY CHAMPIONSHIP RODEO DADE
CITY LLC
9633 HUNDCAST RD
DADE CITY FL 33525

FOR ASSISTANCE CALL US AT:
1-800-829-1040

OR WRITE TO THE ADDRESS
SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 59-3680963. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN as shown above on all federal tax forms, payments, and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing, incorrect information in your account, or cause you to be assigned more than one EIN.

Based on the information shown on your Form SS-4, you must file the following form(s) by the date we show.

Form 1120

03/15/2001

Your assigned tax classification is based on information obtained from your Form SS-4. It is not a legal determination of your tax classification and is not binding on the IRS. If you want a determination on your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Rev. Proc. 98-01, 1998-1 I.R.B. 7 (or the superceding revenue procedure for the year at issue).

If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

If you have questions about the forms shown or the date they are due, you may call us at 1-800-829-1040 or write to us at the address shown above.

If you're required to deposit for employment taxes (Forms 941, 943, 940, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), we will send an initial supply of Federal Tax Deposit (FTD) coupon books within six weeks. You can use the enclosed coupons if you need to make a deposit before you receive your supply.

Start your business off right - pay your taxes the easy way. Pay through the Electronic Federal Tax Payment System (EFTPS). For information about EFTPS, call 1-800-829-3676 and request Publication 966, EFTPS Answers to the Most Commonly Asked Questions.

(IRS USE ONLY) 575A 593680963 11-20-2000 TAMP B 0716802808 SS-4

Please use the label IRS provided when filing tax documents and FTD coupons when making FTD payments. If that isn't possible, you should use your EIN and complete name and address as shown below to identify your account and to avoid delays in processing.

TAMPA BAY CHAMPIONSHIP RODEO DADE
CITY LLC
9633 HUNDCAST RD
DADE CITY FL 33525

If this information isn't correct, please correct it using the bottom part of this notice. Return it to us at the address shown so we can correct your account.

Thank you for your cooperation.

Keep this part for your records.

CP 575 A (Rev. 1-2000)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 A

0716802808

Your Telephone Number () Best Time to Call

DATE OF THIS NOTICE: 11-20-2000
EMPLOYER IDENTIFICATION NUMBER: 59-3680963
FORM: SS-4

INTERNAL REVENUE SERVICE
ATLANTA GA 39901

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