

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000189

FILED  
Aug 21, 2006  
Secretary of State

**Entity Name:** NAPLES CYCLERS GULF COAST RACING, INC.

**Current Principal Place of Business:**

P.O. BOX 771329  
NAPLES, FL 34107 US

**New Principal Place of Business:**

**Current Mailing Address:**

13278 WINSFORD LANE  
FORT MYERS, FL 33912 US

**New Mailing Address:**

P.O. BOX 771329  
NAPLES, FL 34107 US

**FEI Number:** 54-2140478 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

DAVIES, SAND  
240 18TH AVE N  
NAPLES, FL 34119 US

**Name and Address of New Registered Agent:**

DAVIES, SANDI  
895-10TH STREET, SOUTH  
NAPLES, FL 34102 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: SANDI DAVIES

08/21/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DAVIES, SANDI  
Address: 5940 - 18TH AVENUE N  
City-St-Zip: NAPLES, FL 34119 US

Title: D ( ) Delete  
Name: BRITTON, BRANDON  
Address: 1538 SENIOR CT  
City-St-Zip: LEHIGH, FL 33971 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: DAVIES, SANDI  
Address: 895-10TH STREET, SW  
City-St-Zip: NAPLES, FL 34102 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SANDI DAVIES

MISS

08/21/2006

Electronic Signature of Signing Officer or Director

Date