

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004282

FILED
Apr 07, 2005
Secretary of State

Entity Name: SOUTH PALM BEACH OCTOBER REGIONAL TOURNAMENT, INC.

Current Principal Place of Business:

640 EAST ATLANTIC AVENUE
SUITE 1
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

640 EAST ATLANTIC AVENUE
SUITE 1
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 20-1072494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EICHAS, TERRY R
640 EAST ATLANTIC AVENUE
SUITE 1
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: EICHAS, TERRY R
Address: 640 EAST ATLANTIC AVENUE SUITE 1
City-St-Zip: DELRAY BEACH, FL 33483

Title: VD () Delete
Name: LEMPKE, JEFFREY R
Address: 640 EAST ATLANTIC AVENUE SUITE 1
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD () Delete
Name: REY, KEVIN T
Address: 640 EAST ATLANTIC AVENUE SUITE 1
City-St-Zip: DELRAY BEACH, FL 33483

Title: TD () Delete
Name: BUNNING, EARL
Address: 640 EAST ATLANTIC AVENUE SUITE 1
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: TERRY R EICHAS

P

04/07/2005

Electronic Signature of Signing Officer or Director

Date