

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008623

FILED
May 09, 2008
Secretary of State

Entity Name: FLORIDA POWERSPORTS SAFETY COUNCIL, INC.

Current Principal Place of Business:

667 ARNAU DRIVE
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

667 ARNAU DRIVE
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 51-0558254 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:

ARROWOOD, SUZAN
667 ARNAU DRIVE
NEW SMYRNA BEACH, FL 32168 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: P () Delete
Name: ARROWOOD, SUZAN D
Address: 667 ARNAU DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VP () Delete
Name: AUSTIN, LAUREN
Address: 411 PALM STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: S () Delete
Name: DI SARNO, DAVID
Address: 607 BALL STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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:

I hereby certify that the information supplied with this filing does not qualify 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: SUZAN D. ARROWOOD

P

05/09/2008

Electronic Signature of Signing Officer or Director

_____ Date