## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

2a. Mailing Address

PALM BEACH AUTOSPORTS, INC.

**FILED** Jan 22 1998 8:00am Secretary of State

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Not Applicable

\$8.75 Additional

Principal Place of Business	Mailing Address	
160 intracoastal cir Tequesta fl 33469 Us	P O BOX 3405 TEQUESTA FL 33469 US	3. Date Incorporated or Qualified 12/04/1984
		4. FEI Number Applied For

41				40							ree Required
	Suite, Apt. #, etc.			_	Suite, Apt. #, etc.				6.	Election Campaign Financing	\$5.00 May Be
22				27						Trust Fund Contribution	Added to Fees
	City & State				City & State				7.	Is this nonprofit corporation a homeowne	ers association?
23				28						Yes	□ No
	Zip		Country	$\Box$	Zip		ountry		8.	This corporation owes or has paid the cu	rrent year Intangible
24		25		29		30				Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent								10.	Name and Address of New Registered	Agent	
							81	Name			
LOCKE JAMELANA D					$\perp$						
LOCKE, WILLIAM R				82	Street Addres	ess (P.O. Box Number is Not Acceptable)					

LOCKE, WILLIAM R 12734 PINEACRE LANE W PALM BEACH FL 33414

2. Principal Place of Business

W PALM BEACH FL 33414	83	
	84	FL   FL
<ol> <li>Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Sta</li> </ol>	d by	the corporation's board of directors. I hereby accept the appointment as registered

59-2509056

5. Certificate of Status Desired

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change Addition 1.1 TOLE LOCKE, WILLIAM R NAME 1.2 NAME STREET ADDRESS 12734 PINEACRE LANE 1.3 STREET ADDRESS W PALM BCH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE ☐ DELETE 2.1 TITLE Change Addition NAME BAGLEY, PHILIP 2.2 NAME 1109 7TH AVE. N. STREET ADDRESS 2.3 STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE FENGLER, KENNETH 3.2 NAME 3031 NE 22ND ST STREET ADDRESS 3.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change \_\_\_ Addition 4.1 TITLE NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 517IDF NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP \_\_\_ Change DELETE TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 true exemptions are required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.

SIGNATURE:

SIGNATURE:

1/6/98