

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004210

FILED
Jul 16, 2009
Secretary of State

Entity Name: OCALA TRACTOR PULL, INC.

Current Principal Place of Business:

9531 SW 34TH PLACE
OCALA, FL 34481 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 770761
OCALA, FL 344770761 US

New Mailing Address:

FEI Number: 26-0267706 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:

LOKAI, MARTHA J
9531 SW 34TH PLACE
OCALA, FL 34481 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: PSD () Delete
Name: LOKAI, MICHAEL D
Address: 9531 SW 34TH PLACE
City-St-Zip: OCALA, FL 34481

Title: VPTD () Delete
Name: LOKAI, MARTHA J
Address: 9531 SW 34TH PLACE
City-St-Zip: OCALA, FL 34481

Title: D () Delete
Name: SWIFT, RODNEY
Address: 9360 NE 16 TERRACE
City-St-Zip: ANTHONY, FL 32617

Title: D () Delete
Name: KILGORE, WILLIE
Address: 10285 S QUARTERHORSE AVENUE
City-St-Zip: FLORAL CITY, FL 34436

Title: D () Delete
Name: FITZGERALD, PATRICK
Address: 2805 SE 110TH ST - 41-B
City-St-Zip: OCALA, FL 34480

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:

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: JANE LOKAI

VP

07/16/2009

Electronic Signature of Signing Officer or Director

Date