

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010571

FILED
Apr 29, 2009
Secretary of State

Entity Name: ATLANTIC COAST LAWNMOWER RACING ASSOCIATION, INC.

Current Principal Place of Business:

1760 BIRCHWOOD RD
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

1760 BIRCHWOOD RD
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 26-1378592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULLIS, SR., KEITH
1760 BIRCHWOOD RD
JACKSONVILLE BEACH, FL 32250 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: DP () Delete
Name: MULLIS, KEITH
Address: 1760 BIRCHWOOD RD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DVP () Delete
Name: MARLIN, HEATH
Address: 74 SOUTH 6TH ST
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: T () Delete
Name: CONE, GEORGE
Address: 1100 4TH ST SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: S (X) Delete
Name: MULLIS, CATHY
Address: 1760 BIRCHWOOD RD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: JONES, JACK
Address: 47 ULATURN TRAIL
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change () Addition
Name: COBB, DAVID
Address: 74 SOUTH 6TH ST
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: S/T (X) Change () Addition
Name: MULLIS, CATHY
Address: 1760 BIRCHWOOD ROAD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: CATHY MULLIS

S/T

04/29/2009

Electronic Signature of Signing Officer or Director

Date