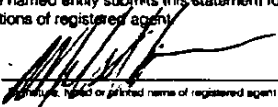
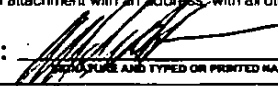


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

1. Mar 22, 2007 8:00 am
Secretary of State

01-19-2007 90037 011 ****70.00

DOCUMENT # N37034			
1. Entity Name OKEEHIEEE BMX PARENTS COUNCIL INC.			
Principal Place of Business 7500 FORESTHILL BLVD WEST PALM BEACH, FL 33415		Mailing Address PO BOX 542542 GREENACRES, FL 33454 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address P.O. BOX 211652	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Royal Palm Bch., FL	
Zip	Country	Zip 33411	Country Palm Bch
4. Name and Address of Current Registered Agent HARRELL, MARK 719 SOUTH CLEARY ROAD WEST PALM BEACH, FL 33412		4. FEI Number 65-0164647	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		Applied For ☐ Not Applicable	
6. Name and Address of New Registered Agent MITCH HORNE 1401 WYNDCIFF DR. WELLINGTON, FL 33414		7. Name and Address of New Registered Agent MITCH HORNE 1401 WYNDCIFF DR. WELLINGTON, FL 33414	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE: 		SIGNATURE:  Mitchell Horne Director	
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
T NAME: BYRON, KIMBERLY STREET ADDRESS: 1005 67TH PLACE NORTH CITY-ST-ZIP: WEST PALM BEACH, FL 33412	☐ Delete	Treasurer NAME: Kimberly Byron STREET ADDRESS: 11065 67th PL N. CITY-ST-ZIP: West Palm Bch, FL 33412	☒ Change ☐ Addition
D NAME: HARRELL, MARK STREET ADDRESS: 719 SOUTH CLEARY ROAD CITY-ST-ZIP: WEST PALM BEACH, FL 33413	☒ Delete	Track Director NAME: MITCH HORNE STREET ADDRESS: 1401 WYNDCIFF DR. CITY-ST-ZIP: Wellington, FL 33414	☒ Change ☐ Addition
VP NAME: BROWN, ROBYN STREET ADDRESS: 14843 APRIL DRIVE CITY-ST-ZIP: LOXAHATCHEE, FL 33470	☒ Delete	President NAME: ROBYN BROWN STREET ADDRESS: 14843 APRIL DRIVE CITY-ST-ZIP: Loxahatchee FL 33470	☒ Change ☐ Addition
P NAME: SAVARESE, RENEE STREET ADDRESS: 4420 122ND DRIVE NORTH CITY-ST-ZIP: ROYAL PALM BEACH, FL 33411	☒ Delete	Vice President NAME: Dennis Neubauer STREET ADDRESS: 719 S. Cleary Rd. CITY-ST-ZIP: West Palm Bch, FL 33413	☒ Change ☐ Addition
S NAME: LOCKLEAR, THERESA STREET ADDRESS: 12535 TEMPLE BLVD CITY-ST-ZIP: WEST PALM BEACH, FL 33412	☒ Delete	CLERK OF COURSE NAME: Theresa Locklear STREET ADDRESS: 12535 Temple Blvd. CITY-ST-ZIP: West Palm Bch, FL 33412	☒ Change ☐ Addition
☐ Delete		Secretary NAME: Jennifer Melvin STREET ADDRESS: 1321 Riverside Cr. CITY-ST-ZIP: Wellington, FL 33413	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date: 3/16/07 Daytime Phone #: 561-718-3352	