

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N37034

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** OKEEHHEELLEE BMX PARENTS COUNCIL INC.

**Current Principal Place of Business:**

7500 FORESTHILL BLVD  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 211652  
ROYAL PALM BEACH, FL 33411 US

**New Mailing Address:**

**FEI Number:** 65-0164647

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HORNE, MITCH  
11491 ANHINGA DRIVE  
WELLINGTON, FL 33414 US

**Name and Address of New Registered Agent:**

HORNE, MITCH  
1265 WHIMBREL ROAD  
WELLINGTON, FL 33414 US

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: \_\_\_\_\_

03/30/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: SCHAAF, MARILYN  
Address: 8 WEST PLUMOSA LANE  
City-St-Zip: LAKE WORTH, FL 33467

Title: D  
Name: CROSS, TOMMY  
Address: 3120 REO LANE  
City-St-Zip: LAKE WORTH, FL 33461

Title: P  
Name: MIHALKO, GREG  
Address: 2941 CROSLEY DRIVE WEST APT C  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: V  
Name: JOHNSON, JOHN  
Address: 7720 FORESTAY DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

Title: S  
Name: HARE, STACEY  
Address: 110 SANTANDER COURT  
City-St-Zip: ROYAL PALM BEACH, FL 33411

I hereby 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 all other like empowered.

SIGNATURE: MARILYN L SCHAAF

TREA

03/30/2010

Electronic Signature of Signing Officer or Director

Date