

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 28, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90221 022 \*\*\*\*61.25

**DOCUMENT # N95000005297**

1. Entity Name

FLORIDA OCEAN RACING ASSOCIATION, INC.



Principal Place of Business

1250 APOLLO BEACH DR  
APOLLO BEACH FL 33572

Mailing Address

6314 LAKE SUNRISE DR  
APOLLO BEACH FL 33572

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-3340942

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PETERS, EDWARD A  
6314 LAKE SUNRISE DR  
APOLLO BEACH FL 33572

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE CD ☒ Delete  
NAME CUSSINS, GEORGE  
STREET ADDRESS 6514 SANTIAGO CT  
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE VCD ☐ Delete  
NAME DAVIDSON, ALAN  
STREET ADDRESS 4431 7TH ST. S  
CITY-ST-ZIP SAINT PETERSBURG FL 33705

TITLE DT ☐ Delete  
NAME NEAL, RICHMAND  
STREET ADDRESS 120 56TH ST. N  
CITY-ST-ZIP SAINT PETERSBURG FL 33710

TITLE DS ☐ Delete  
NAME PETERS, EDWARD A  
STREET ADDRESS 6314 LAKE SUNRISE DR  
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE DRC ☐ Delete  
NAME DINISIO, GENE  
STREET ADDRESS 914 EL RANCHO DR  
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE DFC ☐ Delete  
NAME HAYANE, GEORGE  
STREET ADDRESS 463 W. DAVIS BLVD  
CITY-ST-ZIP TAMPA FL 33606

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition  
NAME TYSON, JAM  
STREET ADDRESS 744 S. DAVIS BLVD  
CITY-ST-ZIP TAMPA, FL 33606

TITLE CD ☒ Change ☐ Addition  
NAME DAVIDSON, ALAN  
STREET ADDRESS 4431 7TH ST. S  
CITY-ST-ZIP ST. PETERSBURG, FL 33705

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VCD ☒ Change ☐ Addition  
NAME PETERS, EDWARD A  
STREET ADDRESS 6314 LAKE SUNRISE DR  
CITY-ST-ZIP APOLLO BEACH, FL 33572

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #