## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000005297

FILED Apr 11, 2006 Secretary of State

Entity Name: FLORIDA OCEAN RACING ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1250 APOLLO BEACH DR 6314 LAKE SUNRISE DR APOLLO BEACH, FL 33572 APOLLO BEACH, FL 33572 **Current Mailing Address: New Mailing Address:** 6314 LAKE SUNRISE DR APOLLO BEACH, FL 33572 FEI Number: 59-3340942 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PETERS, EDWARD A 6314 LAKE SUNRISE DR APOLLO BEACH, FL 33572 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition TYSON, JAN Name: Name: 744 S. DAVIS BLVD Address: Address: City-St-Zip: TAMPA, FL 33606 City-St-Zip: Title: CD (X) Delete Title: () Change () Addition Name: DAVIDSON, ALAN Name: Address: 4431 7TH ST. S Address: City-St-Zip: SAINT PETERSBURG, FL 33705 City-St-Zip: Title: DT (X) Delete Title: () Change () Addition NEAL, RICHMAND Name: Name: Address: 120 56TH ST. N Address: City-St-Zip: SAINT PETERSBURG, FL 33710 City-St-Zip: Title: VCD ( ) Delete Title: () Change () Addition Name: PETERS, EDWARD A Name: Address: 6314 LAKE SUNRISE DR Address: City-St-Zip: APOLLO BEACH, FL 33572 City-St-Zip: Title: DRC () Delete Title: () Change () Addition DINISIO, GENE Name: Name: 914 EL RANCHO DR Address: Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: Title: (X) Delete Title: () Change () Addition HAYANE, GEORGE Name: Name: Address: 463 W. DAVIS BLVD Address: TAMPA, FL 33606 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD A PETERS VCD 04/11/2006