

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005405

FILED  
Feb 02, 2006  
Secretary of State

**Entity Name:** TRI CITY KART CLUB, INC.

**Current Principal Place of Business:**

POST OFFICE BOX 1144  
PINELLAS PARK, FL 337801144

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1144  
PINELLAS PARK, FL 337801144

**New Mailing Address:**

**FEI Number:** 59-3408686

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTIN, AMY L  
35 DAVIS BOULEVARD  
TAMPA, FL 33606 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: TD ( ) Delete  
Name: MARTIN, AMY L  
Address: 35 DAVIS BOULEVARD  
City-St-Zip: TAMPA, FL 33606

Title: PD ( ) Delete  
Name: ROBERTS, MARK  
Address: 5298 49TH AVENUE CIRCLE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33709

Title: VD ( ) Delete  
Name: SCAMPTON, TERRY  
Address: 5260 86TH AVENUE NORTH  
City-St-Zip: PINELLAS PARK, FL 33782

Title: SD ( ) Delete  
Name: STATON, BRENDA  
Address: P.O. BOX 2712  
City-St-Zip: PINELLAS PARK, FL 33782

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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: AMY LEIGH MARTIN

TD

02/02/2006

Electronic Signature of Signing Officer or Director

Date