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Aug 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000000542 (7)**

1. Corporation Name

SUNSHINE BARREL RACERS ASSOCIATION, INC.



Principal Place of Business 16360 JOMAR ROAD SARASOTA FL 34240	Mailing Address 16360 JOMAR ROAD SARASOTA FL 34240
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3. Date Incorporated or Qualified

02/07/1997

4. FEI Number

65-0732763

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 16398 JOMAR ROAD

26 16398 JOMAR ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 SARASOTA, FL

28 SARASOTA, FL

Zip

Country

Zip

Country

24 34240

25 SARASOTA

29 34240

30 SARASOTA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JENKINS, SUSAN B
16360 JOMAR ROAD
SARASOTA FL 34240**

81 Name

PATTY BADGETT

82 Street Address (P.O. Box Number Is Not Acceptable)

16398 JOMAR ROAD

83

84 City

SARASOTA

FL

85 Zip Code

34240

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

DATE

4-22-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE

NAME **TAMBURINO, TERRT J**
STREET ADDRESS **1300 LENA LANE**
CITY-ST-ZIP **SARASOTA FL 34240**

TITLE **D** ☒ DELETE

NAME **JENKINS, SUSAN B**
STREET ADDRESS **16360 JOMAR ROAD**
CITY-ST-ZIP **SARASOTA FL 34240**

TITLE **D** ☒ DELETE

NAME **SHANNON, RONDA**
STREET ADDRESS **1577 NW PINWOOD AVE**
CITY-ST-ZIP **ARCADIA FL 34266**

TITLE **D** ☒ DELETE

NAME **THOMAS, KIM**
STREET ADDRESS **P O BOX 1846**
CITY-ST-ZIP **WAUCHULA FL 33873**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D

PATTY BADGETT

16398 JOMAR ROAD

SARASOTA, FL 34240

D

VICKIE YOUNG

P O BOX 1465

ONECO, FL 34264

D

KIM HOWARD

4942 NW COKER STREET

ARCADIA, FL 34266

D

DELORES NEAL

P O BOX 422

ARCADIA, FL 34265

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* **4-22-98**

CR2E037 (10/97)