

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000692

FILED
Feb 01, 2009
Secretary of State

Entity Name: FLORIDA STATE RALLY, INC.

Current Principal Place of Business:

% CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

% CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 65-0727400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: D () Delete
Name: LEDTERMAN, VALERIE
Address: 3700 W. JUNEAU AVE
City-St-Zip: MILWAUKEE, WI 53201 US

Title: P () Delete
Name: LEDTERMAN, VALERIE
Address: 3700 W. JUNEAU AVE
City-St-Zip: MILWAUKEE, WI 53201 US

Title: S () Delete
Name: WALTERS, HAROLD
Address: 39851 GROVE HEIGHTS
City-St-Zip: LADY LAKE, FL 32159 US

Title: T () Delete
Name: WHEELER, PENELOPE
Address: 8014 BAY LAKES CRT
City-St-Zip: ORLANDO, FL 32836 US

Title: D () Delete
Name: BEAMAN, ARNIE
Address: 3700 W. JUNEAU AVE
City-St-Zip: MILWAUKEE, WI 53201 US

Title: D () Delete
Name: MATTIAS, DANIEL
Address: 3700 W. JUNEAU AVE
City-St-Zip: MILWAUKEE, WI 53201 US

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:

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 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: VALERIE LEDTERMAN

D

02/01/2009

Electronic Signature of Signing Officer or Director

Date