NONPROFIT , CERPORATION \* ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

c/o 1120 E. Hallandale

Beach Boulevard

DOCUMENT #N97000002/47 OK V

SOUTH FLORIDA BARREL RACERS ASSOCIATION, INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

21

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

7230 Garfield Street Hollywood, FL

## FILED May 13, 1999 8:00 am Secretary of State

05-13-1999 90040 017 \*\*\*\*61.25

3. Date Incorporated or Qualifed

65-0768796

4. FEI Number

4/15/97

City & State		City & State  28 Hallandale, FI			5. Certifcate of Status Desired	\$8.75 A	
					3. Certificate of Ottalas Bookes	Fee Red	Required
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00 г	
24	25	29 33009 3	0		Trust Fund Contribution Added to Fees		
Name and Address of Current Registered Agent				,	10. Name and Address of New Registered	l Agent	
MITCHELL D. KLEIN, ESQUIRE 1120 E. Hallandale Beach Blvd. Hallandale, FL 33009				Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City FL 85 Zip Code			
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above							paintared
office or re	to the provisions of Sections 617.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida. Such change was autt	nonized by	the corpo	corporation submits this statement for the purpose to pration's board of directors. I hereby accept the app	ointment as reg	istered
SIGNATURE					equired when reinstation) DATE		
	Signature, typed or printed name of registered agent a		<u> </u>	t signature re	equired when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	20 IN 12
12.			13.		President	Change	Addition
TITLE	PRESIDENI		1		Norman Dallaire	onange	
NAME	racricia marring		1.2 NAME		6041 C W 57 Stroot		
STREET ADDRESS	, = 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1.3 STREET		Davie, FL 33314		
CITY-ST-ZIP	Hollywood - FL	33024	1.4 CITY-S	r-zip	TD 33314	X Change	Addition
TITLE	V-F-D		2.1 TITLE			KZ Change	☐ vadition
NAME	Debbie Wallace		2.2 NAME		Patty Murphy		
STREET_ADDRESS	11450 14. 11. 25 501000		2.3 STREET	ADDRESS	7230 Garfield Street	•	
CITY-ST-ZIP	* ± 41104 0 = 0 = 1		2. 4 CITY-S	T-ZIP	Hollywood, FL 3302		E3 4 1 121
TITLE	SD	☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME	Valerie Knoblock		3.2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP	5196 S. W. 90 Avenue Cooper City, FL 33328		3.4. CITY-ST-ZIP				
TITLE	_		4.1 TITLE			Change	☐ Addition
			4. 2 NAME				
CITECA ABOREGO			4.3 STREET	ADDRESS			
CITY-ST-ZIP	Hallandale, FL	33009	4.4 CITY-S	Γ- ZIP			
TITLE	☐ DELETE €		5 1 TITLE			☐ Change	Addition
NAME			52 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S	r-ZIP			
TITLE			6.1 TITLE	$\Box$		Change	Addition
NAME	62		6.2 NAME				
STREET ADDRESS	6.35		6.3 STREET	ADDRESS			
CITY-ST-ZIP	}			T-21P			
14. I hereby o	certify that the information supplied with	this filing does not qualify for th	ne exempti	on stated	in Section 119.07(3)(i), Florida Statutes. I further c	ertify that the in	formation
officer or	on this annual report or supplemental ar director of the corporation or the receive or Block 13 if changed, or on an attachn	r or trustee empowered to eye	cute this r	anort as n	ature shall have the same legal effect as if made un required by Chapter 617, Florida Statutes; and that d.	my name appe	ars in

SIGNATURE:

Applied For

Not Applicable