

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005524

FILED
Feb 27, 2006
Secretary of State

Entity Name: LIGHTNING BOLT TRACK CLUB, INC.

Current Principal Place of Business:

1157 3RD TERRACE NORTH
ST. PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

1157 3RD TERRACE NORTH
ST. PETERSBURG, FL 33705

New Mailing Address:

FEI Number: 59-3597323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYD, GARLYNN L
1157 3RD TERRACE NORTH
ST. PETERSBURG, FL 33705 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: DCEO () Delete
Name: BOYD, GARLYNN L
Address: 1157 3RD TERRACE NORTH
City-St-Zip: ST PETERSBURG, FL 33705

Title: P () Delete
Name: ETHERIDGE, RENITA
Address: 1157 3RD TERRACE NORTH
City-St-Zip: ST PETERSBURG, FL 33705

Title: T () Delete
Name: BOYD, MARGARET C
Address: 2945 4TH AVE S
City-St-Zip: ST PETERSBURG, FL 33712

Title: TFS () Delete
Name: LEWIS, CATHERINE
Address: 1157 3RD TERRACE NORTH.
City-St-Zip: ST PETERSBURG, FL 33705

Title: VP () Delete
Name: NOBLE, CHRISTI P
Address: 1157 3RD TERRACE NORTH
City-St-Zip: ST. PETERSBURG, FL 33705

Title: SEC () Delete
Name: BERRY, CAROLYN
Address: 1157 3RD TERRACE NORTH
City-St-Zip: ST. PETERSBURG, FL 33705

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: SEC (X) Change () Addition
Name: LATIMORE, JULIA E
Address: 1157 3RD TERRACE NORTH
City-St-Zip: ST. PETERSBURG, FL 33705

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: GARLYNN L. BOYD

CEO

02/27/2006

Electronic Signature of Signing Officer or Director

Date