

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004881

FILED
Feb 25, 2009
Secretary of State

Entity Name: ST. CLOUD BMX, INC.

Current Principal Place of Business:

2401 PEGHORN WAY
ST CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

231 E LAKESHORE BLVD
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SZASZ, REBECCA
231 E LAKESHORE BLVD
KISSIMMEE, FL 34744 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: VD () Delete
Name: MAGMER, WILLIAM
Address: 1112 CYPRESS AVE
City-St-Zip: SAINT CLOUD, FL 34769

Title: PD () Delete
Name: SZASZ, JAMES
Address: 231 E LAKESHORE BLVD
City-St-Zip: KISSIMMEE, FL 34744

Title: T () Delete
Name: SZASZ, REBECCA
Address: 231 E LAKESHORE BLVD
City-St-Zip: KISSIMMEE, FL 34744

Title: S () Delete
Name: MAGMER, SANDRA
Address: 1112 CYPRESS AVE
City-St-Zip: SAINT CLOUD, FL 34769

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 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: REBECCA SZASZ

TREA

02/25/2009

Electronic Signature of Signing Officer or Director

Date