

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006702

FILED
Apr 19, 2011
Secretary of State

Entity Name: NMBPD - TOUR DE FORCE, INC.

Current Principal Place of Business:

ATTN: CRAIG CATLIN
16901 NE 19TH AVENUE
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

ATTN: CRAIG CATLIN
16901 NE 19TH AVENUE
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 65-1005145 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

H. JAMES CATLIN, JR.
1700 ALFRED I. DUPONT BUILDING
169 E. FLAGLER STREET
MIAMI, FL 33131 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: PD
Name: CATLIN, CRAIG
Address: 16901 NE 19TH AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VD
Name: LOVE, DENISE
Address: 16901 NE 19TH AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: STD
Name: DARDEN, YVETTE
Address: 16901 NE 19TH AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D
Name: CRISPIN, DAVE
Address: 16901 NE 19TH AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D
Name: DORAS, BRUCE
Address: 16901 NE 19TH AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

I hereby 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 all other like empowered.

SIGNATURE: DENISE LOVE

VD

04/19/2011

Electronic Signature of Signing Officer or Director

_____ Date