		# P980000	84305								
OAST POWER SPORTS, INC.				1.	·ā		FILED				
Principal Place of Pusiness					1	02 FEB 1 1 PM 12: 41					
Principal Place of Business Mailing Address 6.385 La Rose 3220 DUNDEE ROAD WINTER HAVEN FL 33884 WINTER HAVEN FL 33884 BYONKS VI 114,											
3220 DUNDEE ROAD 6385 La Rose Rd 3220 DUNDEE ROAD Brooks ville, F WINTER HAVEN FL 33884 Brooks ville, FL 34602					, ,		4602 TALLAHA	SSEE	FLORI) A	
2. Principal Place of Business		3. Mailing Address							Qibbe diili del		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		R	E	NSTATEME	M.	PACE	01-02		
City & State		City & State			4. F8	I Number 59-3540045	- C - B		plied For t Applicable		
Zip	Ī	Country	Zip Coun		ntry	5. Certificate of Status Desir		ertificate of Status Desired		8.75 Add	
	6. Name	and Address of Current F	I Registered Agent			L	7. Na	ame and Address of New Regi			-
VANC	011 - BASININ	•			Name						
VANCIL, DANNY J- 3220 DUNDEE ROAD 6 385 La Rosa Rd				Street Address (ox Number is Not Acceptable)				
	ER HAVEN		Wille, FL 3460	no				•			
		J , C	, , , , , , , , , , , , , , , , , , ,	_	Oth.					T Zin Cada	
					City				FL	Zip Code	•
8. The above named entity submits this statement for the purpose of changing its registered office or re						registered	d age	nt, or both, in the State of Florid	a.		
	Λ.		. 0						1/29/	02	
SIGNATURE	Signature, typed o	or printed name of registered agent a	nd title if applicable. (NOTE	Registere	d Agent signatu	ıre required w	hen rein	stating)	DATE		18
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE				IS \$150.0	00					<u> </u>	
Tax filing requirement and elects to do so. After MAY 1, 2001		01 Fee	will be \$5	50.00		 Election Campaign Finance Trust Fund Contribution. 	ing		May Be to Fees		
(See criteria on back)				epartmen	t of State						
11.	l PD	OFFICERS AND I	·	12.			ADD	DITIONS/CHANGES TO OFFICE	RS AND	DIRECTORS Change	Addition
TITLE NAME	VANCIL, D	ANNY J	☐ Delete	TITL NAM						□ Change	☐ Addition
STREET ADDRESS	3220 DUN			STR	EET ADDRESS	4 38	35	La Rosa Rol			
CITY-ST-ZIP	 	AVEN FL 39884		-	-ST-ZIP	Bro	OK	svilla, FL 34	602	_,	
TITLE .	VD PEACOCK	irst ne ša	☐ Delete	TITE						Change	☐ Addition
NAME STREET ADDRESS		, JULIE M. DEE ROAD		NAM STR	ET ADDRESS	ے 4 38	5	La Rosa Road			}
CITY-ST-ZIP		AVEN FL 93884			-ST-ZIP	Bro	×	La Rosa Road Svilla, FL 344	,02		
TITLE	· · <u>.</u>		Delete	TITL	E			•		Change	Addition
NAME			4.4	NAM							
STREET ADDRESSCITY_ST_ZIP					ET ADDRESS - ST-ZEP		٠	ር ነበነ ፣ የር _{ተሞ} ራኒስ ላ	· · · ·	\$550.	613
TITLE			☐ Delete	TITL	1.	. 0	<u>(~ 1</u>	7-01 90010 0	<u> </u>	☐ Change	Addition
NAME				NAM						onango	
STREET ADDRESS					ET ADDRESS			8000049	SO	599-	
CITY-ST-ZIP				CITY	-ST-ZIP			8000049! 	<u>201</u>	047 - 0	07

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Delete

2001 UNIFORM BUSINESS REPORT (UBR)

352-746-6611 Daytime Phone #

200.00 *200.00dition

800004960598---02/20/02--01047--008