2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000001472

Entity Name: SWAMP MOUNTAIN BIKE CLUB, INC.

Current Principal Place of Business:

5315 1ST AVE S ST. PETERSBURG, FL 33707

Current Mailing Address:

5315 1ST AVE S ST. PETERSBURG, FL 33707

FEI Number: 82-4375352

Name and Address of Current Registered Agent:

ORSINI, SCOTT 5315 1ST AVE S ST. PETERSBURG, FL 33707 US

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

Officer/Director Detail :

| Title | VP | Title | OFFICER |
|-----------------|-------------------------|-----------------|-------------------------|
| Name | LAMARCA, MIKE | Name | SANCHEZ, PAT |
| Address | 5315 1ST AVE S | Address | 5315 1ST AVE S |
| City-State-Zip: | ST. PETERSBURG FL 33707 | City-State-Zip: | ST. PETERSBURG FL 33707 |
| Title | PRESIDENT | | |
| Name | RICHESON, SHANE | | |
| Address | 5315 1ST AVE S | | |
| City State 7in | ST. PETERSBURG FL 33707 | | |
| City-State-Zip: | SI. FEIERSBURG FL 33/0/ | | |

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: MIKE LAMARCA

VP

Date

Electronic Signature of Signing Officer/Director Detail

FILED Apr 05, 2021 Secretary of State 5413844313CC

Certificate of Status Desired: No