

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000081

FILED
Apr 09, 2009
Secretary of State

Entity Name: MACHINE'S R/C OFF-ROAD CLUB, INC.

Current Principal Place of Business:

1878 UNIVERSITY PKWY
SARASOTA, FL 34243

New Principal Place of Business:

1872 UNIVERSITY PKWY
SARASOTA, FL 34243

Current Mailing Address:

1878 UNIVERSITY PKWY
SARASOTA, FL 34243

New Mailing Address:

1872 UNIVERSITY PKWY
SARASOTA, FL 34243

FEI Number: 20-4043093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKERSON, EUGENE
1878 UNIVERSITY PKWY
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

HICKERSON, EUGENE
1872 UNIVERSITY PKWY
SARASOTA, FL 34243 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:

04/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HICKERSON, EUGENE
Address: 1878 UNIVERSITY PKWY
City-St-Zip: SARASOTA, FL 34243

Title: VP () Delete
Name: HICKERSON, RYSANN
Address: 1878 UNIVERSITY PKWY
City-St-Zip: SARASOTA, FL 34243

Title: S/T () Delete
Name: MCMILLEN, JANET
Address: 1878 UNIVERSITY PKWY
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HICKERSON, EUGENE
Address: 1872 UNIVERSITY PKWY
City-St-Zip: SARASOTA, FL 34243

Title: VP (X) Change () Addition
Name: HICKERSON, RYSANN
Address: 1872 UNIVERSITY PKWY
City-St-Zip: SARASOTA, FL 34243

Title: S/T (X) Change () Addition
Name: MCMILLEN, JANET
Address: 1872 UNIVERSITY PKWY
City-St-Zip: SARASOTA, FL 34243

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: RYSANN HICKERSON

VP

04/09/2009

Electronic Signature of Signing Officer or Director

Date