

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**Mar 18 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 372510 (8)**  
1. Corporation Name  
**NORTH AMERICAN TESTING COMPANY**



Principal Place of Business <b>1801 WEST INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH FL 32114 US</b>	Mailing Address <b>1801 WEST INTERNATIONAL SPEEDWAY DAYTONA BEACH FL 32114-1215 US</b>
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3. Date Incorporated or Qualified <b>11/10/1970</b>	3a. Date of Last Report <b>04/12/1996</b>
4. FEI Number <b>59-1319218</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent  
**TUMBLESON, DOYLE  
150-A SOUTH PALMETTO AVE  
DAYTONA BEACH FL 32114**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
**FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	VPD	<input type="checkbox"/> DELETE
NAME	SMITH, ROBERT E	
STREET ADDRESS	108 SEA ISLAND CIR	
CITY-STATE-ZIP	DAYTONA BEACH FL	
TITLE	DAST	<input type="checkbox"/> DELETE
NAME	FRANCE, JAMES C.	
STREET ADDRESS	1801 W INTERNATIONAL SPEEDWAY BLVD	
CITY-STATE-ZIP	DAYTONA BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COMBS, HARRY LEE	
STREET ADDRESS	1801 W INTERNATIONAL SPEEDWAY BLVD	
CITY-STATE-ZIP	DAYTONA BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KENNEDY, LESA D	
STREET ADDRESS	1801 W INTERNATIONAL SPEEDWAY BLVD	
CITY-STATE-ZIP	DAYTONA BEACH FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	ALEXANDER, STANTON	
STREET ADDRESS	92 RIDGEFIELD PLACE	
CITY-STATE-ZIP	ORMOND BEACH FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	SCHANDEL, SUSAN G	
STREET ADDRESS	1801 W. INTERNATIONAL SPEEDWAY BLVD	
CITY-STATE-ZIP	DAYTONA BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	W. Garrett Crotty	
1.3 STREET ADDRESS	1801 West International Speedway Blvd.	
1.4 CITY-STATE-ZIP	Daytona Beach, FL 32114	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-STATE-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-STATE-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 contained on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:  **W. Garrett Crotty, Secretary/March 11, 1997 (904)947.6715**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)