FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1997 8:00am

Secretary of State

96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 707167

(3)

DAYTONA 200 MOTORCYCLE CLUB INC Principal Place of Business Mailing Address 3602 INTERNATIOINAL SPEEDWAY BLVD. P.O. BOX 2502 DAYTONA BEACH FL 32124 DAYTONA BEACH FL 32115-2502 3. Date Incorporated or Qualified 04/16/1964 04/09/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 70-7167740 SAME Suite, Apt #, etc. Not Applicable 26 SAML Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name WOOLF, DANIEL D 82 Street Address (P.O. Box Number is Not Acceptable) 3586 OLD DELAND RD. 83 DAYTONA BCH. FL 32124 84 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am amiliar with, and accept the appointment as registered agent. I am amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Addition DELETE Change TITLE 1.1 TITLE SAME NAME WOOLF, DANIEL D 1.2 NAME 3586 OLD DELAND ROAD STREET ADDRESS 1.3 STREET ADDRESS **DAYTONA BEACH FL 32124** CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Addition 2.1 TITLE TITLE SNOW, SHELBY BAIR, JIM NAME 2.2 NAME IH WOODLAKE DR 6 PEARL DR. 2.3 STREET ADDRESS STREET ADDRESS **ORMOND BEACH FL 32174** PORT ORANGE FL 2 4 CITY - ST - 7IP CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE TREASURER DAMON ALAN WHITAKER, FRANK 3.2 NAME NAME BOY APACHE TR 251 N. TYMPERCREEK RD. 3.3 STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32174 3.4. CITY-ST-ZIP ORMOND BEACH CITY - ST- 7IP DELETE 4.1 TITLE TITLE SNOW , ROX ANNÉ MOLVE, JOHN 4. 2 NAME NAME 14 WOODLAKE DR 1006 10TH ST. STREET ADDRESS 4.3 STREET ADDRESS HOLLY HILL FL 32117 PORT ORANGE FL 321 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE TITLE HOWELL, MARK 5.2 NAME NAME 1057 S. GREEN ACRES CIRCLE 5.3 STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 32119 5.4 CITY-ST-ZIP CITY-ST-ZIP TRUSTEE DELETE Change Addition 6.1 TITLE TITLE WHITAKER, FRANK ARTHUR, BILL NAME 6.2 NAME 851 N TYMBER CREEK RD 924 BERKSHIRE RD. STREET ADDRESS **6.3 STREET ADDRESS** 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 indicated 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 component of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.