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Apr 27 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 734764 (4)

1. Corporation Name

JACKSONVILLE TRACK CLUB, INC.

Principal Place of Business

Mailing Address

1511 S MCDUFF AVE
JACKSONVILLE FL 32205
US

112 THIRD STREET-
STE. 7
NEPTUNE BEACH FL 32266
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

1112 THIRD STREET

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

DUSS, JOHN S., IV
200 WEST FORSYTH STREET
SUITE 1000
JACKSONVILLE FL 32202

3. Date Incorporated or Qualified

12/31/1975

4. FEI Number

59-1829543

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

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 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, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME SD
TILLET, DOUGLAS
STREET ADDRESS 2165 OAK STREET
CITY-ST-ZIP JACKSONVILLE FL 32204

TITLE ☒ DELETE

NAME VD
GOTTSCHALK, DAVID
STREET ADDRESS 156 CROSSCOVE CIR.
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE ☒ DELETE

NAME D
TASKETT, HERBERT
STREET ADDRESS 2810-2 INDIA AVENUE
CITY-ST-ZIP JACKSONVILLE FL 32211

TITLE ☐ DELETE

NAME PD
TENBROECK, JOHN
STREET ADDRESS 2336 URBAN ROAD
CITY-ST-ZIP JACKSONVILLE FL 32210

TITLE ☐ DELETE

NAME D
LAMAR, STROTHER
STREET ADDRESS 1511 S MCDUFF AVE.
CITY-ST-ZIP JACKSONVILLE FL 32205

TITLE ☐ DELETE

NAME TD
HATTEN, DAVID
STREET ADDRESS 1404 PINWOOD RD.
CITY-ST-ZIP JACKSONVILLE BEACH FL 32250

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME PRESIDENT/DIRECTOR
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME YAN ALSTYNE, MARK VD
2.3 STREET ADDRESS 4552 DEEP GROVE CT.
2.4 CITY-ST-ZIP JACKSONVILLE, FL 32224

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME SEC./DIR.
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME 974 OWEN AVENUE
6.3 STREET ADDRESS JACKSONVILLE BEACH FL 32250
6.4 CITY-ST-ZIP

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

David L. Hatten

4/2/98

904-249-7425

CR2E037 (10/97)