2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

May 15, 2007 8:00 am Secretary of State DOCUMENT # N01000008952 1. Entity Name 05-15-2007 90008 002 ****61 25 JACKSONVILLE RACEWAYS HALL OF FAME, INC. Principal Place of Business Mailing Address 2327 BLANDING BLD 2327 BLANDING BLD JACKSONVILLE FL 32210 JACKSONVILLE FL 32210 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/06) 1st MOORE City & State City & State 4. FEL Number Applied For NO-T APPLICABLE Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DELK, JAMES B Street Address (P.O. Box Number is Not Acceptable) 2327 BLANDING BLVD., SUITE 1 JACKSONVILLE FL 32210 City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ADDRESS CRANYZ -CHange ☐ Delete RIGGINS, THOMAS H. NAME RIGGINS, THOMAS H NAME ADDRESS CHANG STREET ADORESS 2327 BLANDING BLVD NO 1 275 HAMMOND BLUD STREET ADDRESS ouly CITY-ST-ZIP JACKSONVILLE FL 32210 CITY-ST-7IP JACKSOLULIE, AL. 32205 HILL DCOR ☐ Delete THILE Change ■ Addition NAME CARTER, WILLIAM J NAME STREET ADDRESS STREET ADDRESS 8752 SUSIE ST CITY - ST- ZIP CHY-ST-ZIP JACKSONVILLE FL 32210 D Delete TITLE ☐ Change ☐ Addition NAME NAME SMELTZER, ROBERT W STREET ADDRESS STREET ADDRESS 1710 BIG BRANCH RD CITY-ST-ZIP CITY-ST-ZIP MIDDLEBURG FL 32068 TITLE HHE □ Delete ☐ Change ☐ Addition NAME NAME EUBANKS, ROBERT E STREET ADDRESS STREET ADDRESS P.O. BOX 6 CITY - ST - ZIP CITY-ST-ZIP BRYCEVILLE FL 32009 TITLE Delete TITLE Change ☐ Addition NAME GODBEE, ROGER NAME STREET ADDRESS 2338 BARLAD DR RD STREET ADDRESS CITY-ST-7IP JACKSONVILLE FL 32210 CITY-ST-ZIP TITLE **DVCB** ☐ Delete TITLE ☐ Addition JAMES B NAME 2327 BLANDING BLVD. NOI DELK, JAMES B NAME ADDRESS CHA STREET ADDRESS 2317 BLANDING BLVD., #101 STREET ADDRESS JACKSOMUILIS, FI. 32210 JACKSONVILLE FL 32210 CITY-ST-/IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ED NAME OF SIGNING OFFICER OR DIRECTOR