


04-14-2003 90764 038 ****61.25

2003 NOT-FOR-PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)

55047293

DOCUMENT # N02000000872					
1. Entity Name RACERS CARE, INC. RACERS CARE, INC.					
Principal Place of Business 515 CHERRY STREET SOUTH DAYTONA FL 32119-2017		Mailing Address 515 CHERRY STREET SOUTH DAYTONA FL 32119-2017			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 33-1006164	
Zip		Country		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		8.75 Additional Fee Required <input type="checkbox"/>			
6. Name and Address of Current Registered Agent MIAMI CENTER REGISTERED AGENTS, LLC 201 S BISCAYNE BLVD S#1700, MIAMI CENTER MIAMI FL 33131			7. Name and Address of New Registered Agent		
Name			Street Address (P.O. Box Number is Not Acceptable)		
City			FL Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required upon re-issuance)</small>					
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	NAME	STREET ADDRESS	TITLE	NAME	STREET ADDRESS
Pres. CEO	William E. Borow	515 Cherry St South Daytona, FL 32119			
Vice President	Wesley Bernoth	186 Bermuda Park Bermuda Park, NC 27006			
Director	Mr. Clay Campbell	P.O. Box 1351 Martinsville, VA 24115-3311			
Director	Mr. R. Don Rice	242 Fines Drive Clemson, SC 29634-5709			
Director	Bill Borow	515 Cherry St South Daytona, FL 32119			
Director	Wesley Bernoth	186 Bermuda Park Bermuda Park, NC 27006			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 517, 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: William E. Borow			Date: 4-11-03		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		

CR-REG07 (10/02)