

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Sep 06, 2007
Secretary of State**

DOCUMENT# N49948

Entity Name: NORTHWEST FLORIDA TRACK CLUB, INC.**Current Principal Place of Business:**POST OFFICE BOX 911
SHALIMAR, FL 32579**New Principal Place of Business:**70 3RD AVE
#24
SHALIMAR, FL 32579**Current Mailing Address:**POST OFFICE BOX 911
SHALIMAR, FL 32579**New Mailing Address:**

FEI Number: 59-3123885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:CARDOW, BONNIE
46 LONGWOOD DRIVE
SHALIMAR, FL 32579 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: WOLFE, EUGENE K
Address: 105 PINEDALE WAY
City-St-Zip: FORT WALTON BEACH, FL 32548Title: S () Delete
Name: WOLFE, CHERYL
Address: 105 PINEDALE WAY
City-St-Zip: FORT WALTON BEACH, FL 32548Title: T () Delete
Name: MCMAHON, BRIAN
Address: 2575 BARRON CT
City-St-Zip: SHALIMAR, FL 32579Title: V () Delete
Name: SIMMONS, DEBORAH
Address: 1689 PARKSIDE CIR
City-St-Zip: NICEVILLE, FL 32578**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: PIAZZA, FILIPPO
Address: 1 SHADY OAK LN
City-St-Zip: SHALIMAR, FL 32579Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: V (X) Change () Addition
Name: PIAZZA, PAULA
Address: 1 SHADY OAK LN
City-St-Zip: SHALIMAR, FL 32579

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN T. MCMAHON

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09/06/2007

Electronic Signature of Signing Officer or Director

Date