

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2008 8:00 am
Secretary of State

05-30-2008 90217 035 ***150.00

DOCUMENT # P03000022717 1. Entity Name XTREME MOTOR SPORTS CORPORATION																																																																																																																													
Principal Place of Business 110 CHERRYHILL CIRCLE LONGWOOD, FL 32779			Mailing Address 110 CHERRYHILL CIRCLE LONGWOOD, FL 32779																																																																																																																										
2. Principal Place of Business - No P.O. Box # 2158 S. ORANGE BLOSSOM TR Suite, Apt. #, etc.		3. Mailing Address 2158 S. ORT Suite, Apt. #, etc.																																																																																																																											
City & State APOPKA, FL Zip 32703		City & State APOPKA, FL Zip 32703		4. FBI Number 54-2100679																																																																																																																									
Country USA		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																																									
6. Name and Address of Current Registered Agent HARNEY, DENNIS M 110 CHERRYHILL CIRCLE LONGWOOD, FL 32779				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 _____ (NOTE: Registered Agent Signature required when re-registering) DATE _____																																																																																																																													
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008			9. Election Campaign Financing Trust Fund Contribution, ☐ \$5.00 May Be Added to Fees																																																																																																																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%;">P</td> <td style="width: 10%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>HARNEY, DENNIS M</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>110 CHERRYHILL CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LONGWOOD, FL 32779</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VP</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>HARNEY, PAULA M</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>110 CHERRYHILL CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LONGWOOD, FL 32779</td> <td></td> </tr> <tr> <td>TITLE</td> <td>S</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>HARNEY, DENNIS P</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>110 CHERRY HILL CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LONGWOOD, FL 32779</td> <td></td> </tr> <tr> <td>TITLE</td> <td>T</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>HARNEY, CHRISTOPHER J</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4019 BONNIE DRIVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>APOPKA, FL 32703</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>HARNEY, KENNETH J</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>110 CHERRY HILL CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LONGWOOD, FL 32779</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%;"></td> <td style="width: 10%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						TITLE	P	☐ Delete	NAME	HARNEY, DENNIS M		STREET ADDRESS	110 CHERRYHILL CIRCLE		CITY-ST-ZIP	LONGWOOD, FL 32779		TITLE	VP	☐ Delete	NAME	HARNEY, PAULA M		STREET ADDRESS	110 CHERRYHILL CIRCLE		CITY-ST-ZIP	LONGWOOD, FL 32779		TITLE	S	☐ Delete	NAME	HARNEY, DENNIS P		STREET ADDRESS	110 CHERRY HILL CIRCLE		CITY-ST-ZIP	LONGWOOD, FL 32779		TITLE	T	☐ Delete	NAME	HARNEY, CHRISTOPHER J		STREET ADDRESS	4019 BONNIE DRIVE		CITY-ST-ZIP	APOPKA, FL 32703		TITLE	D	☐ Delete	NAME	HARNEY, KENNETH J		STREET ADDRESS	110 CHERRY HILL CIRCLE		CITY-ST-ZIP	LONGWOOD, FL 32779		TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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 information.																																																																																																																													
SIGNATURE: _____ 5-1-08 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																													