## 2002 Uniform Business Report (UBR)

1. Entity Nar	IMENT # <b>S2594</b> ACK, INC.	9	<u> </u>	•	Apr 17, Secreta 04-17-2002	2002 8 1ry of \$ 90044 043 **		
Principal Place of Business  EBRO DOG TRACK  EBRO FL 32437  US		Mailing Address 6558 DOG TRACK ROAD EBRO FL 32437 US			á í bhí á mhí á bhí a mhí	ATOLÍ ÁLOK FIZIK LIDA		
2. Principal Place of Business 3		3. Mailing Address						
Suite, Apt	Suite, Apt. #, etc.	#, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI Number Applied For Not Applicable				
Zip	Country	Zip	Country		5. Certificate of Status Desired	□ \$8.75	Additional	
···	6. Name and Address of Current R	egistered Agent			7. Name and Address of New Re			
				Name				
HESS, RICHARD G. INT: HWY. 79 & 20				reet Address (P.O. Box Number is Not Acceptable)				
EBRO FL	32437							
£.			City	у		FL Zip	Code	
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agen  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!! FEE IS \$ After May 1, 2002 Fee will I Make Check Payable to Depart					10. Election Campaign Fina	~ ~ <del>•</del>	55.00 May Be	
11.	OFFICERS AND D		12.		ADDITIONS/CHANGES TO OFFICE	CERS AND DIREC	TORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HESS, RICHARD G. 6558 DOG TRACK ROAD EBR FL 32437	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP			☐ Cha	nge	
NAME STREET ADDRESS CITY-ST-ZIP	VD HESS, BRYAN L. 4210 GLEN HAVEN LANE TAMPA FL 33624	☐ Delete	' TITLE NAME STREET ADDR CITY-ST-ZIP			☐ Cha	nge 🗌 Addition	
NAME STREET ADDRESS CITY-ST-ZIP	HESS, STOCKTON R 6512 DOG TRACK ROAD EBRO FL 32437		NAME STREET ADDR	RESS	<del></del>	Cha	nge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS		☐ Chai	nge 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS		☐ Chai	nge 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDR. CITY-ST-ZIP	ESS		☐ Char	nge Addition	
mulcaleu	pertify that the information supplied with the on this report or supplemental report is triporation or the receiver or trustee empower or on an attachment with an address, with	De and accurate and that my el	anatura en	all have the car	an inani affaat on if mada undar ee	+b. +b.c.   6-c. c 44		

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/02 850-234-3943 Date Daytime Phone #