

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P14841** (1)
1. Corporation Name
RACETRAC PETROLEUM, INC.



Principal Place of Business 300 TECHNOLOGY COURT SMYRNA GA 30082-5232	Mailing Address 300 TECHNOLOGY COURT SMYRNA GA 30082-5232
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 06/15/1987	
				4. FEI Number 63-0642959	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and filed if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	P/AS/D
NAME	LENKER, MAX V.	1.2 NAME	
STREET ADDRESS	300 TECHNOLOGY COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	SMYRNA GA	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	
NAME	BOLCH, SUSAN BASS	2.2 NAME	
STREET ADDRESS	300 TECHNOLOGY COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	SMYRNA GA	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	T/CFO
NAME	DUMBACHER, BOB	3.2 NAME	
STREET ADDRESS	300 TECHNOLOGY COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	SMYRNA GA	3.4 CITY-ST-ZIP	
TITLE	CED	4.1 TITLE	CE/C/AS
NAME	BOLCH, CARL, JR.	4.2 NAME	
STREET ADDRESS	300 TECHNOLOGY COURT	4.3 STREET ADDRESS	
CITY-ST-ZIP	SMYRNA GA	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	BOCH, CARL 111	5.2 NAME	
STREET ADDRESS	300 TECHNOLOGY CT	5.3 STREET ADDRESS	
CITY-ST-ZIP	SMYRNA GA	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	BOLCH MORAN, ALLISON	6.2 NAME	
STREET ADDRESS	300 TECHNOLOGY CT	6.3 STREET ADDRESS	
CITY-ST-ZIP	SMYRNA GA	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE **Robert J. Dumbacher** 4/13/98 770-431-7600 x1189

CR2E034 (10/97)