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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

THE CO	ORPORATE MOTORSPORT				
Principal Plac	e of Business	Mailing Address			hibid Brisa Brian (Bris Bite saat
877 EXECUTIVE CENTER DR., W. SUITE 303 ST PETERSBURG FL 33702		P. O. BOX 2 2095 ST PETERSBURG FL 33742 US		DO NOT WRITE IN THI	IS SPACE
US	OND I'L WIGE	00		3. Date Incorporated or Qualified	
				03/04/1993	
2, Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apl. #, etc.		59-3167644	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 g. Name and Address of Curre	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registers	YesNo
		in nagistereo Agent	81 Name	10. Name and Address of New Registers	o Agent
	iscara, ernest l 7 executive center dr., W.				
	TE 303		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	PETERSBURG FL 33702		83		
			84 City	·····	85 Zip Code
				F	
l .	do the provisions of Sections 607.056 registered agent, or both in the State im familiar with and accept the oblig	02 and 607.1508, Horida Statute : of Florida. Such change was a pitions of, Section 607.0505, Flo	es, the above-named corp authorized by the corpora orida Statules.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE	Signature hyped or printed name of a printer it as	orca at the dapple stile (NOTE	Registered Agent signature reco	rod when reinstating) DATE	
12		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DP Baughman, James	☐ OEL E TE	1.1 TITLE		Change Addition
NAME Street address	TYNECASTLE		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	BANNER ELK NC		1.4 CHY-ST-ZIP		
TITLE	\$	DELETE	2.1 1111.6		Change Addition
NAME	WEBBER, ANDREA M.		2.2 NAME		
STREET ADDRESS	TYNECASTLE		2.3 STREET ADDRESS		
CITY-ST-ZIP	BANNER ELK NC 28604		2. 4 DITY-S1-ZIP		
TOTLE		☐ DELETF	3.1 TITLE	·	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3 4. C(TY-ST-Z)P 4.1 T/TLE		Change Addition
NAME			4. 2 NAME		C Change C France
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		[7] ALLES	5.4 C(1Y - S1 - ZIP		
TITLE		☐ DELETE	6.1 TITLE	الأناف المراد المراجع المناس المساور والمناج والمناج والمناج	Lhange Addition
NAME			6.2 NAME	30000254 47 -06/02/9801031-\(
STREET ADDRESS			63 STREET ADDRESS	***2820 00	

14. 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 aneual report is true and accurate and that my signature shall have the same legal effect as if made unity 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 chijinged, or on any attachyrent with an address.

FILED

Jun 01 1998 8:00am

Secretary of State