2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000003236

1. Entity Name
FLORIDA RACING.NET INC.

Principal Place of Business	Mailing Address
1433 BROOKS LANE OVIEDO, FL 32765	1433 BROOKS LANE OVIEDO, FL 32765

02082004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-3664207

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ENTEMINGER, JANICE
1433 BROOKS LANE
OVIEDO, FL 32765

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

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BUTTAR, ZAHID A
STREET ADDRESS	3901 IBIS DR.
CITY-ST-ZIP	ORLANDO, FL 32803
TITLE	TD
NAME	ENTSMINGER, JANICE
STREET ADDRESS	1433 BROOKS LANE
CITY-ST-ZIP	OVIEDO, FL 32765
TITLE	SD
NAME	STYLES, CATHY
STREET ADDRESS	155 LAKE DESTINY TRAIL
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714
TITLE	D
NAME	PARKER, CANDACE
STREET ADDRESS	1605 S. ASBURY AVE.
CITY-ST-ZIP	ORLANDO, FL 32803
TITLE	D
NAME	SMITH, VINCE
STREET ADDRESS	6733 GADWALL LANE
CITY-ST-ZIP	ORLANDO, FL 32801
TITLE	VD
NAME	LIPSCOMB, BOB
STREET ADDRESS	1831 BIMINI DRIVE
CITY-ST-ZIP	ORLANDO, FL 32806

U00000047097
02/12/04-80027-002 61.25

12. 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 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 617, 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 empowered

SIGNATURE: Janice Entsminger 2/9/04 407-481-9182
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #