

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001241

Entity Name: LIVING LEGENDS OF AUTO RACING, INC.**Current Principal Place of Business:**2400 S RIDGEWOOD AVE
SUNSHINE MALL
DAYTONA BEACH, FL 32119**Current Mailing Address:**P.O. BOX 290854
PORT ORANGE, FL 32129 US**FEI Number:** 59-3178027**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WEST, Nanci G
817 LITTLE TOWN ROAD
PORT ORANGE, FL 32127 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	T
Name	WEST, Nanci G
Address	817 LITTLE TOWN ROAD
City-State-Zip:	PORT ORANGE FL 32127

Title	D
Name	ANDERSON, J. R
Address	944 S. BEACH ST
City-State-Zip:	DAYTONA BEACH FL 32114

Title	S
Name	MANDALA, PAULETTE
Address	14 N VENETIAN WAY
City-State-Zip:	DAYTONA BEACH FL 32127

Title	PD
Name	FOX, RAYMOND SR
Address	1432 GOLF VIEW DR.
City-State-Zip:	DAYTONA BEACH FL

Title	D
Name	WEST, JOHN
Address	817 LITTLETOWN ROAD
City-State-Zip:	PORT ORANGE FL 32127

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PAULETTE MANDALA**SECRETARY****03/13/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date