

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003681

Entity Name: MOTOR RACING HERITAGE ASSOCIATION, INC.**Current Principal Place of Business:**300 S. ORCHARD ST
ORMOND BEACH, FL 32174**Current Mailing Address:**P.O. BOX 10953
DAYTONA BEACH, FL 32120-0953 US**FEI Number: 59-3368970****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HEDDY, SUZANNE
300 S. ORCHARD ST.
ORMOND BEACH, FL 32174 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	P
Name	VIA , ROLAND
Address	534 EAGLE DRIVE
City-State-Zip:	HOLLY HILL FL 32117

Title	VPD
Name	MCKIM, BUZ
Address	501 SOUTH COLLEGE ST.
City-State-Zip:	CHARLOTTE NC 28202

Title	DT
Name	HEDDY, SUZANNE
Address	300 SOUTH ORCHARD ST.
City-State-Zip:	ORMOND BEACH FL 32174

Title	VPD
Name	AXELROD, DAVID
Address	1104 JACARANDA DRIVE
City-State-Zip:	DAYTONA BEACH FL 32118

Title	D
Name	SMITH, DAN
Address	9 SUNSET BLVD.
City-State-Zip:	ORMOND BEACH FL 32176

Title	D
Name	HEDDY, SUZANNE
Address	300 SOUTH ORCHARD ST.
City-State-Zip:	ORMOND BEACH FL 32174

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: SUZANNE HEDDY**TREASURER****02/10/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date