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(1/9/99)

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Feb 08, 1999 8:00am

Secretary of State

02-08-1999 90016 031 ****150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 223549

1. Corporation Name

UNIVERSAL ACTIVITIES, INC.

Principal Place of Business

821 E INTERNATIONAL SPEEDWAY
P.O. BOX 3576
DAYTONA BEACH FL 32118-4519
US

Mailing Address

821 E. INTERNATIONAL SPEEDWAY BLVD.
P.O. BOX 3576
DAYTONA BEACH FL 32118-4519
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/11/1959

4. FEI Number

59-1115441

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TOWNSEND, JIMMIE L
821 E. INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BEACH FL 32018

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME TOWNSEND, J L
STREET ADDRESS 821 BROADWAY
CITY-ST-ZIP DAYTONA BEACH FL

TITLE S ☐ DELETE

NAME ESSER, DORTHY
STREET ADDRESS 445 N ATLANTIC
CITY-ST-ZIP ORMOND BEACH FL

TITLE D ☐ DELETE

NAME TOWNSEND, MARY G
STREET ADDRESS 821 BROADWAY
CITY-ST-ZIP DAYTONA BEACH

TITLE D ☐ DELETE

NAME EST. OF W.S. KELLEY
STREET ADDRESS 1224 CURRY ROAD
CITY-ST-ZIP NASHVILLE, TN 00000

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/99

704-252-7598

CR2E034 (11/98)