

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 230027

1. Entity Name

SUNSHINE SPEEDWAY INC

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90219 005 ***150.00

Principal Place of Business

15236 AVALON AVE
CLEARWATER FL 33760
US

Mailing Address

15236 AVALON AVE
CLEARWATER FL 33760
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-0900480**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MUSGRAVE, PHYLLIS L
2238 GLENMOOR ROAD SOUTH
CLEARWATER FL 34624

Name

Street Address (P.O. Box Number is Not Acceptable)

City

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11:

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
PD	MUSGRAVE, C SIBYL	15236 AVALON AVE	CLEARWATER, FL 33520				
STD	MUSGRAVE, PHYLLIS L.	2238 GLENMOOR ROAD SOUTH	CLEARWATER FL				
VD	HILL, BONNIE M	1983 LEVINE LANE	CLEARWATER FL				
D	HILL, J FRANK	1983 LEVINE LANE	CLEARWATER FL				

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sibyl C. Musgrave
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sibyl C. Musgrave 4/9/01

Date

727-531-2088

Daytime Phone #

CR2E034 (10/00)