## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 542734 (9)

TRACK SHACK OF ORLANDO, INC.

FILED	
Apr 13 1998 8:00ai	n
Secretary of State	· •

11/178981212

Principal Place of Business Mailing Address  1104 N MILLS AVE 1104 N MILLS AVE				TABLET GIVE STATE				
ORLANDO FL 32803 US		ORLANDO FL 32803 US	ORLANDO FL 32803		DO NOT WRITE IN THIS SPACE			
03		03			3. Date Incorporated or Qualified			
					08/10/1977			
	ace of Business	2a. Mailing Address			4. FEI Number	Applied For		
21 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Suite, Apt. #, etc.		59-1754680	Not Applicable 88.75 Additional			
22		27		5. Certificate of Status Desired	Fee Required			
City & State		City & State	ł···¬¬ ´		6. Election Campaign Financing	\$5.00 May Be		
Zip         Country		7 <sub>ip</sub>	<del></del>		Trust Fund Contribution L.  8. This corporation owes or has paid the			
24	25	- ├-¬ '	30	,	Personal Property Tax due June 30.	Yes No		
£4	9. Name and Address of Curren		<u> </u>	····	10. Name and Address of New Registe			
HUF	IGES, JON A		81	Name				
	3 WYCLIFF DRIVE		82	Street Add	dress (P.O. Box Number is Not Acceptable)			
ORLANDO FL 32803				On occurac	areas (1.0. Box Hamber is Hot Neceptuble)			
			83	3				
			84	City		85 Zip Code		
44 5	10,000,000	0 CO7 4000 Florida Cartata	- 11-0 -1-0		rporation submits this statement for the purpo	FL B 2 P C C C C C C C C C C C C C C C C C C		
office or re	ogistered agent, or both, in the State	of Florida, Such chan <b>ge wa</b> s <b>a</b> u	s, the above uthorized b	re-named cor by the corpora	ation's board of directors. I hereby accept the	e appointment as registered		
agent. Lar	m familiar with, and accept the obliga	itions of, Section 607.0505, Flor	rida Statule	es.	<i>(/</i>	1.160		
SIGNATURE	Signature, typed or pointed range of governor age	of and the if copie able (NOTE	e Traisland et	tent sequature req.	uired when reinstalling)	/_10		
12.		DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TOTLE			Change Addition		
NAME	HUGHES, JON A		1.2 NAME					
STREET ADDRESS	1623 WYCLIFF DRIVE		13 STREE	T ADDRESS				
CITY-ST-ZIP	ORLANDO FL		1.4 CHY-ST-7IP					
TITLE	VTS	☐ DETEM	21 TITLE			L_ Change L Addition		
NAME	HUGHES, DOROTHY E		2.2 NAME					
STREET ADDRESS	1623 WYCLIFF DRIVE		23 STHEE	1 ADDRESS				
CITY-ST-ZIP	ORLANDO FL	er e		· ST · ZIP		Change Addition		
TITLE		DELETE	3 1 THLE			L Change L Addition		
NAME CARREST ADDRESS			3.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP TITLE			3.4. CHY-	-31-41		Change Addition		
NAME			4 2 NAME					
STREET ADDRESS				T ADDRESS				
CiTY-ST-ZIP			4.4 DITY-			,		
TITLE		DELETE	51 TITLE			☐ Change ☐ Addition		
NAME			52 NAME					
STREET ADDRESS			5 3 STREE	T ADDRESS				
CITY-ST-ZIP		,	54 CITY-	ST - ZIP				
TITLE		☐ DELETE	61 TITLE			Change Addition		
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	I ADDRESS				
CITY-ST-Z#P			6.4 CITY-					
14. Thereby 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 armuel report or supplemental armual 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.								