Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90071 025 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 561817

1. Corporation Name

BRYANT RACING EQUIPMENT, INC.

								0 0 0 1 1 0 1 1 1 1
Principal Place of Business Mailing Address								
1900 HIGHWAY 87		1900 HIGHWAY 87						
NAVARRE FL 32566		NAVARRE FL 32566				DO NOT WRITE IN THIS SPACE		
		•				3. Date Incorporated or Qualifed		
						03/06/1978		
		Do Atolina Address				4. FEI Number		pplied For
— ·	lace of Business	⊢ , *	2a. Mailing Address			59-1807169	<u> </u>	lot Applicable
21			Suite, Apt. #, etc.			29-1007 109		Additional
Suite, Apt. #, etc.			h			5. Certificate of Status Desired		Required
City & State			City & State			6 Floation Compaign Financing	\$5.00) May Ba
City & Stat	e	<u>├</u>				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
23\ 7in	Country		Cou	intry		8. This corporation owes the current year		1.15
Zip	· — ·		30			Personal Property Tax.	Yes	□No
24	9. Name and Address of Curr	29 29 Agent	30			10. Name and Address of New Registers	d Agent	
	5. Name and Address of Curr	ent Registered Agent		81	Name			
BRY.	ANT, BILLY G			Ĺ				
	HWY 87		8:		Street Ad	ess (P.O. Box Number is Not Acceptable)		
	ARRE FL 32566							
1470	ATTIVE TE GEOOG			83				
				84	City	F	85 Zip	Code
A C				┸┸		rporation submits this statement for the purpose		la societorod
office or i	registered agent, or both, in the Sta im familiar with, and accept the obli	te of Florida, Such change	was authonzed	1 hv f	he corpora	tion's board of directors. I nereby accept the ap-	ointment as	registered
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable.		i Agent	signature requ	ired when reinstating) DATE		000
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	Change	
TITLE	VD	□ DELETE		1.1 TITLE			[_] Change	Addition
NAME	BRYANT, RICHARD G		1.2 N	AME				
STREET ADDRESS			1.3 \$	TREET	ADDRESS			Ì
CITY-ST-ZIP	NAVARRE FL			1.4 CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		
TITLE	VD	D DELETE 2.1 T		TLE			Change Change	e ☐ Addition }
NAME	BRYANT, TIMOTHY R	RYANT, TIMOTHY R		AME	i			-
STREET ADDRESS	23 SOLAR ST.			2.3 STREET ADDRESS				
CITY-ST-ZIP	MARY ESTHER FL.		2,40	:ПY- <u>S</u> Т	r-ZIP	<u> </u>		
TITLE	PD DELETE		.ETE 3.1 TI	3.1 TITLE			Change	Addition
NAME	BRYANT, BILLY G		3.2 N	AME				
STREET ADDRESS	7991 NEWPORT ST.		3.3 S	TREET	ADDRESS			1
CITY-ST-ZIP	NAVARRE FL		3.4. 0	HY-ST	r-ZIP			
TITLE	SD □ DELETE			4.1 TITLE			Change	Addition
NAME	BRYANT, VIRGINIA F		4.21	IAME	1			}
STREET ADDRESS			4.3 S	4.3 STREET ADDRESS				1
CITY-ST-ZIP				4.4 CITY-ST-ZIP				
TITLE			5.1 TITLE			Chang		
NAME	BRYANT, RANDY L		5.2 N					ļ
NAME STREET ADDRESS		ST DR			ADDRESS			
	NAVARRE FL	J, JII		ity-st	1			
CITY-ST-ZIP	INVAVUUE I C	DEI					☐ Chang	a Addition
TITLE			6.2 N					
NAME	Ţ				ADDRESS			{
STREET ADDRESS	SI		0.33	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP