

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # 579332 1. Entity Name TRACK SHACK, INC.	
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Principal Place of Business 1104 N MILLS AVE ORLANDO, FL 32803 US	Mailing Address 1104 N MILLS AVE ORLANDO, FL 32803 US
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02202006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1868684	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HUGHES, JON A 1623 WYCLIFF DRIVE ORLANDO, FL 32803
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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. I am familiar with, and accept the obligations of registered agent.
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HUGHES, JON A 1623 WYCLIFF DRIVE ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTS HUGHES, DOROTHY E 1623 WYCLIFF DRIVE ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS HUGHES, JON A. 1623 WYCLIFF DRIVE ORLANDO, FL
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DO NOT WRITE IN THIS SPACE

100000446938
03/08/06-80031-023 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.
SIGNATURE: <u>Dorothy Hughes</u> Dorothy Hughes 2/21/06 4078981313
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #