


2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 579332	
1. Entity Name TRACK SHACK, INC.	

FILED
Apr 26, 2007 08:00 AM
Secretary of State

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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02202007 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 <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUGHES, JON A
1623 WYCLIFF DRIVE
ORLANDO, FL 32803

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	VT 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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03/03/07-80065-004 150.00

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 807, 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: *Jon A. Hughes* **4/23/07** **407 898 1313**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #