## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#728617** 

FILED Jun 19, 2008 Secretary of State

Entity Name: FLORIDA TRACK CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

2160 NE 1ST BLVD #379 GAINESVILLE, FL 32609 US

Current Mailing Address: New Mailing Address:

P. O. BOX 12463 UNIVERSITY STATION GAINESVILLE, FL 32604 US

FEI Number: 23-7181954 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GIER, TIM WHITE, TOM 1427 NE 22 AVE 916 NE 7 TER

GAINESVILLE, FL 32609 US GAINESVILLE, FL 32601 US

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: TOM WHITE 06/19/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 BURKE, LUKE
 Name:
 WHITE, TOM

 Address:
 2415 SW 24TH ST., #3
 Address:
 916 NE 7 TER

City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: GAINESVILLE, FL 32601

Title: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GIER, TIM
 Name:

 Address:
 1427 NE 22 AVE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32609
 City-St-Zip:

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JOHNSON, ART
 Name:

 Address:
 16130 NW 32ND AVE.
 Address:

 City-St-Zip:
 NEWBERRY, FL 32669
 City-St-Zip:

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ADAMLE, PATTY
 Name:

 Address:
 4626 SW 84 DRIVE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM WHITE PD 06/19/2008