

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 751272**

1. Entity Name  
SUNCOAST RACE WEEK, INC.



Principal Place of Business

19806 READING RD  
LUTZ, FL 33549 US

Mailing Address

19806 READING RD  
LUTZ, FL 33549 US



02072008 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-2874168

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

DAWSON, MICHAEL W  
19806 READING RD  
LUTZ, FL 33549

**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 reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DPT  
NAME DAWSON, MICHAEL W  
STREET ADDRESS 19806 READING RD  
CITY-ST-ZIP LUTZ, FL 33549

TITLE DV  
NAME PENNINGTON, GEORGE  
STREET ADDRESS 13420 LAS PALMAS DR.  
CITY-ST-ZIP LARGO, FL

TITLE DS  
NAME PENNINGTON, BETH  
STREET ADDRESS 13420 LAS PALMAS DR  
CITY-ST-ZIP LARGO, FL

TITLE D  
NAME MOORE, HENRY  
STREET ADDRESS 1003 S STERLING AVE  
CITY-ST-ZIP TAMPA, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

U00000824703  
02/20/08-80089-009 61.25

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 617, 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:

*Michael W. Dawson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*2/7/08*  
Date

*813-947-4840*  
Daytime Phone #