FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

1995 MAR -9 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 764992 (4)

1. Corporation Name

MID-FLORIDA QUARTER MIDGET RACING ASSOCIATION, I NC.

Principal Place of Business	Mailing Address
137 MARGATE MEWS LONGWOOD FL 32779	PO BOX 608425 ORLANDO FL 32860 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/14/1982
3a. Date of Last Report: 04/26/1994
4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

2. Principal Place of Business
21: 3535 Daman Road
22: Suite, Apt. #, etc.
23: City & State: Orlo Apopka, Fl.
24: Zip: 32703
25: Country: Orange

2a. Mailing Address
26:
27: Suite, Apt. #, etc.
28: City & State
29: Zip
30: Country

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WAY, STEVE
9276 PINTO WAY
ORLANDO FL 32810

10. Name and Address of New Registered Agent

81 Name: Keith Abbott
82 Street Address (P.O. Box Number is Not Acceptable): 3512 Curtis Dr.
83:
84 City: Apopka FL 85 Zip Code: 32703

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Keith M. Abbott
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	EADS, RICK	1.2 NAME	Same
STREET ADDRESS	37149 TREFOIL LN	1.3 STREET ADDRESS	
CITY-ST-ZIP	UMATILLA FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	Vice President ☒ Change ☐ Addition
NAME	HITE, LINDA	2.2 NAME	Randy Hite
STREET ADDRESS	3729 FALLING LEAF LANE	2.3 STREET ADDRESS	6037 Graceline Dr.
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	Orlando, Fl. 32810
TITLE	TD	3.1 TITLE	Treasurer/D ☒ Change ☐ Addition
NAME	KEELING, MARLA	3.2 NAME	Terry [redacted] Rhodes
STREET ADDRESS	3604 FALLING LEAF LANE	3.3 STREET ADDRESS	6037 Graceline Dr.
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	Orlando, Fl. 32810
TITLE	VD	4.1 TITLE	Secretary/D ☒ Change ☐ Addition
NAME	EADO II, RICK	4.2 NAME	Maureen Abbott
STREET ADDRESS	37149 TREFOIL LN	4.3 STREET ADDRESS	3512 Curtis Dr.
CITY-ST-ZIP	UMATILLA FL	4.4 CITY-ST-ZIP	Apopka, Fl. 32703
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	500001426645
CITY-ST-ZIP		5.4 CITY-ST-ZIP	-03/10/95--01071--004
TITLE		6.1 TITLE	****130.00 ☐ Change ☐ Addition ****130.00
NAME		6.2 NAME	DLA
STREET ADDRESS		6.3 STREET ADDRESS	3-9
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard E Eads Jr. 1-25-95 (904) 357-2101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0037065