

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # F94000005307

1. Entity Name

SFX MOTOR SPORTS, INC.



**FILED**  
04 FEB 18 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

220 WEST 42ND STREET, ATTN: LEGAL DEP  
NEW YORK NY 10036

Mailing Address

220 WEST 42ND STREET, ATTN: LEGAL DEP  
NEW YORK NY 10036

2. Principal Place of Business

220 West 42nd St.

Suite, Apt. #, etc.

3. Mailing Address

220 West 42nd St.

Suite, Apt. #, etc.

City & State

New York, NY 1

City & State

New York, NY

Zip

10036

Country

New York

Zip

10036

Country

New York

4. FEI Number

74-1990536

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of New Registered Agent

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO MAYS, L L C 200 EAST BASSE RD. SAN ANTONIO TX 78209	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MAYS, MARK P COO 200 EAST BASSE RD. SAN ANTONIO TX 78209	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVP MAYS, RANDALL T CFO 200 EAST BASSE RD. SAN ANTONIO TX 78209	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP HEAD, DALE A 2000 WEST LOOP SOUTH HOUSTON TX 77027	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP HILL, HERBERT W CAO 200 EAST BASSE RD. SAN ANTONIO TX 78209	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPS WYKER, KENNETH E GC 200 EAST BASSE RD. SAN ANTONIO TX 78209	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO Brian Becker 2000 West Loop South New York, NY 10036	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Charles Mancuso 495 North Commons Dr. Aurora, IL 60504	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Dale A. Head

2/11/04

917-421-5773

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 445032 4375356

AUTHORIZATION :

*Patricia Pigato*

COST LIMIT : \$ 150.00

ORDER DATE : February 17, 2004

ORDER TIME : 9:51 AM

ORDER NO. : 445032-090

CUSTOMER NO: 4375356

CUSTOMER: Ms. Christina V. Lynge  
Sfx Entertainment Inc.  
220 West 42nd Street

New York, NY 10036

ANNUAL REPORT FILING

NAME: SFX MOTOR SPORTS, INC.

RECEIVED  
04 FEB 18 AM 10:58  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - Ext. 2914

EXAMINER'S INITIALS: \_\_\_\_\_