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## 2006 FOR PROFIT CORPORATION REINSTATEMENT

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DOCUMENT # F96000006528  1. Entity Name ACTION PERFORMANCE COMPANIES, INC.								FILED  06 DEC -5 77 3-53  → SEC							
Principal Place of Business 1480 S. HOHOKAM DR. TEMPE, AZ 85281 US				Mailing Address 1480 S. HOHOKAM DR. TEMPE, AZ 85281 US					A T	TALILAHA					
Principal Place of Business     6301 Performance Dr     Suite, Apt. #, etc.				3. Mailing Address 6301 Performan Suite, Apt. #, etc.			ce Dr.		The Republic Research					206	
City & State Concord, NC				City & State Concord, NC					4. FEI Number 86-0704792			-	Applied For Not Applicable		
Zip 28027	Country			Zip Count 28027 US			*		<u> </u>	of Status Desired	d 🔲		75 Addi Required	itional	
6. Name and Address of Current Registered Agent			tered Agent		-	Name		7. Name and Address of New Registered Agent							
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD						CORPORATION SERVICE COMPANY  Street Address (P.O. Box Number is Not Acceptable)									
PLANTATION, FL 33324						1201 HAYS				Zip			ip 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 Asst. Vice President 12/5/06															
	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 \$750.00 After January 1, 2007, Fee will be \$900.00															
10.	,	OFFICERS A	ND DIREC		1	1.			ADDITIONS,	CHANGES TO C	FFICERS				1
TITLE NAME	DCP Delete WAGENHALS, FRED W							residen				Change	☐ Addition	}	
STREET ADDRESS CITY-ST-ZIP	1480 S. HOHOKAM DR. TEMPE, AZ 85281			s	STREET ADDRESS 6			Ruth Crowley 5301 Performance Drive Concord, NC 28027							
TITLE	CEO Delete				TITLE		C1	Chief Financial Office Phange Addition							
NAME STREET ADORESS CITY-ST-ZIP	1480 S. HO	WAGENHALS, FRED W 1480 S. HOHOKAM DR. TEMPE, AZ 85281			s	STREET ADDRESS L			Donnie Bobbitt same as above						
TITLE	DV Delete					TITLE G		G	General Counsel & SecEetary Addition						
NAME STREET ADDRESS	VOLOSIN, MELODEE 1480 S. HOHOKAM DR.			NAME STREE			ME REET ADDRESS J		T. Thomas Warlick, IV						
CITY+ST-ZIP	TEMPE, AZ	85281				ITY-	ST-ZIP								
TIFLE NAME	TS RIDDIFORD, DAVID						ITLE IAME						Change	Addition	
STREET ADDRESS CITY-ST-ZIP	1	1480 S. HOHOKAM DR. TEMPE, AZ 85281				STREET ADDRESS CITY-ST-ZIP									<u> </u>
TITLE	D Delete				TITLE										
NAME STREET ADDRESS	MATTHEWS, ROBERT 1480 S. HOHOKAM DR.				NAME STREET ADDRESS		61			451	حان				
Criy-St-ZIP	TEMPE, AZ	85281					ST-ZIP								]
TITLE NAME	D Delete BAUM, ED				TITLE NAME						Change	Addition			
SIREEF ADDRESS 1480 S. HOHOKAM DR. CITY-ST-ZIP TEMPE, AZ 85281							ST-ZIP								
12. I hereby certify that the information supplied with this filling 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an appears, with all other like empowered.  SIGNATURE:  Secretary + General Lower November 9, 20th 704/454 - 4098															
SIGNATURE: Secretary + General Consul November 9, 2006 704/454-4098  SIGNATURE and Typed OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  D															





N SERVICE COMPANY				
	ACCOUNT NO.	:	072100000032	
	REFERENCE	:	640963 71306	33
	AUTHORIZATION	:	Spelle le ma	
	COST LIMIT	:	\$ 750.00	
ORDER DATE :	December 5, 2006			
ORDER TIME :	11:13 AM			
ORDER NO. :	640963-005			
CUSTOMER NO:	7130633			
	DOMESTIC F	ILI	NGS	
NAME:	ACTION PERFOR INC.	MAN	CE COMPANIES,	RE DEPAR DIVISION 2006 C
XX REINSTA	TEMENT			THENT OF SH ACKNOWLED ACKNOWLED
PLEASE RETURN	THE FOLLOWING AS	PR	COOF OF FILING:	FEE 27:
XX PLAIN	FIED COPY STAMPED COPY FICATE OF GOOD ST	AND	DING	HG 47
CONTACT PERSO	N: Carina L. Dun	lap	o - Ext# 2951	

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