| | UNIFORM BUS | JBR) | FILED Apr 16, 2001 8:00 am Secretary of State | | | | | 0478734 | | |
|--|---|--|---|---|---|------------------------------------|----------------|------------------------------|---------------------|-------------|
| • | oo sprint car racing, I | NC. | | | | 16-2001 900 | - | | | |
| Principal Plac | ce of Business | Mailing Address | | | | | | | | |
| C/O WILLIAM STAUFFER 5510 HOWELL BRANCH RD WINTER PARK FL 32792-9327 2. Principal Place of Business | | C/O WILLIAM STAUFFER 5510 HOWELL BRANCH RD WINTER PARK FL 32792-9327 3. Mailing Address | | | | | | | | |
| | | | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | C | O NOT WRITE I | N THIS SP | ACE | | |
| City & State | | City & State | | 4. | 4. FEI Number 59-2436624 Applied For Not Applicable | | | | | |
| Zip | Country | Zip | Zip Country | | Certificate of Stat | us Desired | | 3.75 Add e Require | | |
| | 6. Name and Address of Curren | nt Registered Agent | Na | ame | Name and Addre | ss of New Reg | stered Age | ent – | | - |
| | JFFER, WILLIAM HOWELL BRANCH RD | | Sti | eet Address (P.O. I | Box Number is No | t Acceptable) | | <u> </u> | |] |
| WINT | TER PARK FL 32789 | | Cit | | | | F I | Zip Code | | |
| 9 The should | named entity submits this statement | for the purpose of changing in | | | | o State of Florid | | | | - |
| 9. This corpo Tax filing r | Signature, typed or printed name of registered age pration is eligible to satisfy its intangit requirement and elects to do so. ria on back) | ole FILE NOW After MAY 1, 2 | /!!! FEE IS \$ 2001 Fee will | be \$550.00 | 10. Election C | ampaign Finance I Contribution. | DATE | | O May Be to Fees | |
| 11. | | D DIRECTORS | 12. | A | DITIONS/CHANG | SES TO OFFICE | | | |] |
| TITLE NAME STREET ADDRESS | PD Stauffer, William 5510 Howell Branch RD | Delete | TITLE NAME STREET ADD | | | | L |] Change | Addition | 034 (10/00) |
| CITY-ST-ZIP TITLE NAME | WINTER PARK FL | Delete | CITY-ST-ZI TITLE NAME | r | ,, | | C |] Change | Addition | CR2E03 |
| STREET ADDRESS CITY-ST-ZIP | | | STREET ADD CITY-ST-ZI | 1 | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Delete | TITLE NAME STREET ADD CITY-ST-ZI | 1 | it i mar to <u>ti</u> r mm | · `` `` *** * * * * * * | Ξ.Ξ.Ε |] Change | Addition | |
| TITLE NAME STREET ADORESS CITY-ST-ZIP | | Delete | TITLE NAME STREET ADD CITY-ST-ZII | 1 | | , | |] Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Delete | TITLE NAME STREET ADD CITY-ST-ZI | J | | | |] Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | · · · · · · · · · · · · · · · · · · · | Delete | TITLE NAME STREET ADD CITY-ST-ZIF | RESS | | | |] Change | Addition | |
| 13. I hereby c indicated | ertify that the information supplied wi on this report or supplemental report | is true and accurate and that | or the exemptio my signature s | n stated in Section hall have the same | legal effect as if n | hade under oath | i; that I am i | an officer | or director | |
| changed, | poration or the receiver or trustee em or on an attachment with an address | , with all other like empowered | d. | y Unapter 607, Flori | da Statutes; and t | hat my name ap | pears in Bl | OCK 11 OF | BIOCK 12 II | } |