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CR # 3419

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # K57149 (2)

1. Corporation Name

WIRE TO WIRE RACING DIGEST, INC.



Principal Place of Business

Mailing Address

5100 W. SILVER SPRINGS BLVD.  
SUITE 100  
OCALA FL 34482  
US

PO BOX 210  
OCALA FL 34478  
US

3. Date Incorporated or Qualified

01/10/1989

3a. Date of Last Report

04/19/1995

2. Principal Place of Business

2a. Mailing Address

21 851 NW 24 CT.

26 P.O. Box 2106

4. FEI Number

59-2924681

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 SUITE # 102

28 SUITE # 102

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23 Ocala, FL

28 Ocala, FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 34475

25 MARION

29 34478

30 MARION

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AUDETTE, DANIELLE M  
5100 W. SILVER SPRINGS, BLVD, SUITE 100  
OCALA FL 34482

81 Name AUDETTE, DANIELLE M.

82 Street Address (P.O. Box Number is Not Acceptable)  
851 N.W. 24 CT. #102

83 Ocala, FL 34475

84 City FL 85 Zip Code

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 Danielle M. Audette Danielle M. Audette

4/15/96

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 C  
NAME APPLETON, ARTHUR I.  
STREET ADDRESS 8318 NW 90TH TERRACE  
CITY-ST-ZIP Ocala FL

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE P  
NAME AUDETTE, FERNAND J.  
STREET ADDRESS 6 CHALLEDON CLOSE  
CITY-ST-ZIP Ocala FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE V  
NAME AUDETTE, JOAN I.  
STREET ADDRESS 6 CHALLEDON CLOSE  
CITY-ST-ZIP Ocala FL

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ST  
NAME APPLETON, MARTHA  
STREET ADDRESS 8318 NW 90TH TERRACE  
CITY-ST-ZIP Ocala FL

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: F.S. AUDETTE

4/15/96 (352) 732-8858

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (12/95)