## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT
CORPORATION
ANNUAL REPORT
1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90053 038 \*\*\*150.00

## DOCUMENT # K62620

OCEANSHORE MOTORSPORTS, INC.

525 FENTRESS BOULEVARD POST OFFICE BOX 2860 DAYTONA BEACH FL 32114 US		P. O. BOX 2860 POST OFFICE BOX 2860 DAYTONA BEACH FL 3212C-2860 US		DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed  02/01/1989			
2. Principal Place of Business		2a. Mailing Address		-	4. FEI Number	L	oplied For
21		26			59-2938519		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifca e of Status Desired	•	Additional equired
City & Strite		City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to <sup>=</sup> ees
Zip 24	Count y	Zip Coun 29 30			8. This corporation owes the current year Interpretation of Property Tax.	angibie Yes	[]No
9. Name and Address of Current Registered Agent			<u>'</u>		10. Name and Address of New Registered	Agent	
	3. Hame and Add 255 of Content	togiotorou rigani	81	Name			
VOGI	ES, WILLIAM J.						
525 (	FENTRESS BOULEVARD		82	Street	Address (P.O. Box Number is Not Acceptable)		
DAYI	ONA BEACH 32115		83				
			84	City	FI_	. ] ]	Ccde
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named co-poration 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, Fix rida Statutes.  SIGNATUR E							
01011/10112	Signature, typed or printed nar ie of registered agent.	ind title if applicable (NOTE: Re	gistered Ager	t signature i	required when reinstating) DATE		
12	OFFICERS AND		13		ADDITICNS/CHANGES TO OFFICERS / N		
TITLE	DP	/□ SELETE	1.1 TITLE		DPVST	Change	X X Addition
NAME	VOGES, WILLIAM J.		1.2 NAME		ROOT, CHAPMAN J., II		
STREET ADDRESS	525 FENTRESS BLVD.		1.3 STREET	ADDRESS	OZO IZMINZOO DZIBI		
CITY-ST-ZIP	DAYTONA BEACH FL	Y	1.4 CITY-S	r-ZIP	DAYTONA BEACH, FL 32114		77.4
TITLE	T	Z  QELETE	21 TITLE			☐ Change	☐ Addition
NAME	VOGES, WILLIAM J.		2.2 NAME				İ
STREET ADDRESS	525 FENTRESS BOULEVARD		2.3 STREET	ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH FL		2.4 CITY-S	T-ZIP			
TITLE	VP	DELETE	3.1 TITLE			Change	☐ Addition
NAME	WIGGINS, DONALD J.	•	3.2 NAME				
STREET ADDRESS	525 FENTRESS BOULEVARD	,	3.3 STREET	ADDRESS	•		
CITY-ST-ZIP	DAYTONA BEACH FL		3.4. CITY-S	T- ZIP		<del></del>	
TITLE	SVP	DELETE	4.1 TITLE		]	Change	☐ Addition
NAME	ROOT, CHAPMAN J.	/ \	4. 2 NAME				
STREET ADDRESS	525 FENTRESS BOULEVARD		4.3 STREET	ADDRESS	3		
CITY-ST-ZIP	DAYTONA BEACH FL		4 4 CITY-S	r-zip			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			52 NAME				
STREET ADDRESS			53 STREET		5		
CITY-ST-ZIP			5.4 CITY-\$	r-ZIP			
TITLE		☐ DELETE	61 TITLE			Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET				ľ
CITY-ST-ZIP			6.4 CITY-S	r-ziP			

14. I hereby certify that the information supplied with this filing does not qualify to the exemption stated in Section 119.0 7(3)(i), Florida Statutes. I further sertify 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 the my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNAL URE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIREC

4/21/99 (904) 258-4700 Daytime Phone # CR2E034 (11/98)