

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED AND FILED**

**95 APR 25 AM 11:19**

**CORPORATION ANNUAL REPORT 1995**



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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # K92486 (5)**

1. Corporation Name  
**ORLANDO CIRCUITS, INC.**

Principal Place of Business  
**1409 SLUGH BLVD.  
ORLANDO FL 32806**

Mailing Address  
**1409 SLUGH BLVD.  
ORLANDO FL 32806**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>06/01/1989</b>	3a. Date of Last Report <b>04/21/1994</b>
21		26		4. FEI Number <b>59-2953290</b>	Applied For <input type="checkbox"/> Not Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23	City & State	28	City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24	Zip	25	County	29	Zip
				30	County
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**SHANKLE, RONALD B.  
6351 ORANGE BAY AVE.  
ORLANDO FL 32819**

81 Name **SHANKLE, RONALD B.**

82 Street Address (P.O. Box Number is Not Acceptable)  
**9101 BAYWARD CT.**

83

84 City **ORLANDO** FL 85 Zip Code **32819**

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 \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<b>P</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SHANKLE, RONALD B.</b>	1.2 NAME	<b>SHANKLE, RONALD B.</b>
STREET ADDRESS	<b>2545 DIVERSIFIED WAY</b>	1.3 STREET ADDRESS	<b>2545 DIVERSIFIED WAY</b>
CITY - ST - ZIP	<b>ORLANDO FL</b>	1.4 CITY - ST - ZIP	<b>ORLANDO, FL 32804</b>
TITLE		2.1 TITLE	<b>V/S</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	<b>JACK MORRISON</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>2545 DIVERSIFIED WAY</b>
CITY - ST - ZIP		2.4 CITY - ST - ZIP	<b>ORLANDO, FL 32804</b>
TITLE		3.1 TITLE	<b>T</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	<b>BONNIE SHANKLE</b>
STREET ADDRESS		3.3 STREET ADDRESS	<b>2545 DIVERSIFIED WAY</b>
CITY - ST - ZIP		3.4 CITY - ST - ZIP	<b>ORLANDO, FL 32804</b>
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 110.07(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if appropriate, or on an attachment with an address.

**SIGNATURE:** *Ronald B. Shankle* **PRESIDENT** 4/21/95 407/841-8018