

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000003173

1. Entity Name

MOTORSPORTS PRODUCTIONS, LLC

**FILED**  
**Apr 22, 2002 8:00 am**  
**Secretary of State**

04-22-2002 90229 022 \*\*\*\*50.00

Principal Place of Business

1801 WEST INTERNATIONAL SPEEDWAY BLVD.  
DAYTONA BEACH FL 32114-1243

Mailing Address

1801 WEST INTERNATIONAL SPEEDWAY BLVD.  
DAYTONA BEACH FL 32114-1243

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CROTTY, W. GARRETT

1801 W. INTERNATIONAL SPEEDWAY BLVD  
DAYTONA BEACH FL 32114

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip 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.

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 \$50.00**  
**Make Check Payable to Department of State**  
**Due By May 1, 2002**

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**M**  
**NASCAR DIGITAL ENTERTAINMENT, LTD.**  
**1801 W INTERNATIONAL SPEEDWAY BLVD**  
**DAYTONA BEACH FL 32114**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/10/2002

CR2E083 (9/01)