

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018962

FILED
Apr 15, 2004
Secretary of State

Entity Name: NORTH FLORIDA MOTOSPORTS, LLC

Current Principal Place of Business:

6653-12 POWERS AVENUE
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

6653-12 POWERS AVENUE
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 59-3748402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEWITT, BRETT C
6653 POWERS AVENUE
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: HEWITT, BRETT C
Address: 6653-12 POWERS AVENUE
City-St-Zip: JACKSONVILLE, FL 32217

Title: MGRM () Delete
Name: CURCID, FRANK T
Address: 6653-12 POWERS AVENUE
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: CURCIO, FRANK T
Address: 6653-12 POWERS AVENUE
City-St-Zip: JACKSONVILLE, FL 32217

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: BRETT HEWITT

MGRM

04/15/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date