2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000311

Entity Name: FLORIDA OPEN WHEEL LITES, LLC

FILED Jan 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1327 ALTMAN ROAD 6434 S.E. BRANDYWINE COURT JACKSONVILLE, FL 32221 LIS

#106

STUART, FL 34997

Current Mailing Address: New Mailing Address:

6434 S.E. BRANDYWINE COURT 1327 ALTMAN ROAD JACKSONVILLE, FL 32221 US

#106 STUART, FL 34997 US

FEI Number: 04-3585707 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUNDEEN, RICHARD OSULLIVAN, KAREN M 2710 SABAL PALM DRIVE 1327 ALTMAN ROAD JACKSONVILLE, FL 32221 US US EDGEWATER, FL 32141

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: KAREN M. OSULLIVAN 01/07/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition

VENTRESCA, LOUIS KRAUTHOFF, PHIL Name: Name: 55 WALTON BLVD Address: 6434 S.E. BRANDYWINE COURT #106 Address:

City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: STUART, FL 34997

Title: MGRM () Delete Title: MGRM (X) Change () Addition

LUNDEEN, RICHARD Name: RICHMOND, ROGER Name: Address: 1327 ALTMAN ROAD Address: 18457 OHARA DRIVE

City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: PORT CHARLOTTE, FL 33948

Title: () Delete Title: MGRM () Change (X) Addition

WOLFE, ROGER Name: Name: 32950 LAKESHORE DRIVE Address: Address: City-St-Zip: City-St-Zip: TAVARES, FL 32778

Title: () Delete Title: MGRM () Change (X) Addition

Name: Name: STOUT, MICHAEL Address: Address: 9180 BOOTS LANE City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32220

Title: () Delete Title: MGRM () Change (X) Addition

OSULLIVAN, SONNY Name: Name: 2710 SABAL PALM DRIVE Address: Address: City-St-Zip: City-St-Zip: EDGEWATER, FL 32141

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SONNY OSULLIVAN **MGMR** 01/07/2007