

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

2/1

FILED
Mar 15, 2004 8:00 am
Secretary of State

02-16-2004 90163 002 ****50.00

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1. Entity Name
RED SOX RACING ASSOCIATION, LLC



Principal Place of Business
**301 YAMATO ROAD, SUITE 2200
BOCA RATON, FL 33431**

Mailing Address
**301 YAMATO ROAD, SUITE 2200
BOCA RATON, FL 33431**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02102004 Chg-LLC CR2E083 (10/03)

4. FEI Number
43-0084700

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

**MERBAUM, NEAL
301-YAMATO RD., SUITE 2200
BOCA RATON, FL 33431**

Name **HAROLD TALISMAN**
Street Address (P.O. Box Number is Not Acceptable)
**301 YAMATO RD
SUITE 2200**
City **BOCA RATON** FL Zip Code **33431**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME **MGRM. RESOURCES** ☐ Delete
STREET ADDRESS **ESTATE RESOURCES MANAGEMENT, INC.**
CITY-ST-ZIP **301 YAMATO RD., SUITE 2200
BOCA RATON, FL 33431**

TITLE
NAME **ESTATE** ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME **KEVIN KOSHI** ☐ Change ☒ Addition
STREET ADDRESS **301 YAMATO RD, STE 2200**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME **EDWIN TWIST** ☐ Change ☒ Addition
STREET ADDRESS **301 YAMATO RD, STE 2200**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME **NATHAN ROBERTS** ☐ Change ☒ Addition
STREET ADDRESS **301 YAMATO RD, STE 301**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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

2/11/04 (561) 241-0018
Date Daytime Phone #