2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073193

Address:

City-St-Zip:

Entity Name: TWISTED APPLE RACING LLC

FILED May 06, 2005 Secretary of State

| Current Principal P | New Principal Place of Business: | | | |
|--|--|----------------------|------------------|--|
| 235 W. BRANDON B BRANDON, FL 3351 | | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 3146 PINE TOP DR VALRICO, FL 33594 | | | | |
| | FEI Number Applied For() FEI N 7.193(2)(b), F.S., the limited liability company d of Current Registered Agent: | | he prior notice | Certificate of Status Desired () f New Registered Agent: |
| Name and Address | or Current Registered Agent. | ivallie ali | u Auuress o | i New Registered Agent. |
| LAFAVE, DENISE M 3146 PINE TOP DR. VALRICO, FL 33594 | US | | | |
| The above named en in the State of Florida | tity submits this statement for the purpose | e of changing | its registered | d office or registered agent, or both |
| SIGNATURE: | | | | |
| Electronic Signature of Registered Agent | | | | Date |
| MANAGING MEMBERS/MEMBERS: | | ADDITIONS/CHANGES: | | |
| Title: Name: | () Delete | Title: Name: | MS LAFAVE. DE | ()Change(X)Addition NISE M |

Address:

City-St-Zip:

3146 PINE TOP DRIVE

VALRICO, FL 33594

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: DENISE M. LAFAVE MS 05/06/2005