STREET ADDRESS

CITY - ST - ZIP TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED **2008 LIMITED LIABILITY COMPANY** Apr 23, 2008 08:00 AN Secretary of State **ANNUAL REPORT** DOCUMENT # L05000027963 GOLD COAST RACING LLC Principal Place of Business Mailing Address 127 QUEEN CHRISTINA COURT 127 QUEEN CHRISTINA COURT FORT PIERCE, FL 34949 FORT PIERCE, FL 34949 01042008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2544702 Not Applicable \$5.00 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent CALDWELL, JOHN G DO NOT WRITE 127 QUEEN CHRISTINA COURT FORT PIERCE, FL 34949 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE CALDWELL, JOHN G NAME STREET ADDRESS 127 QUEEN CHRISTINA COURT U00000916905 05/13/08-80020-008 138.75 CITY-ST-ZIP FORT PIERCE, FL 34949 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 fiability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE: INTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE