2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055810

Name:

Address:

City-St-Zip:

DAVIS, RICHARD A JR

4452 WORCESTER ROAD

SARASOTA, FL 34231 US

Entity Name: DAVIS MOTOR SPORTS LLC

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4452 WORCESTER ROAD SARASOTA, FL 34231 US **Current Mailing Address: New Mailing Address:** 4452 WORCESTER ROAD SARASOTA, FL 34231 US FEI Number: 26-0256065 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: ROBERTS, PAMELA 4452 WORCESTER ROAD SARASOTA, FL 34231 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/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete ROBERTS, PAMELA Name: Name: 4452 WORCESTER ROAD Address: Address: City-St-Zip: SARASOTA, FL 34231 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: DAVIS, TAMMY Name: DAVIS, TAMMY Address: 5711 DEER HOLLOW LANE Address: 5711 DEER HOLLOW LANE W City-St-Zip: SARASOTA, FL 34232 US City-St-Zip: SARASOTA, FL 34232 US Title: MGRM () Delete Title: () Change () Addition DAVIS, CAROL A Name: Name: 2481 SHALIMAR TERRACE Address: Address: City-St-Zip: NORTH PORT, FL 34286 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: PAMEL ROBERTS MGR 04/21/2009