FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L60716

(2)

Mailing Address

STEPCHILD RACING, INC.

Principal Place of Business

FILED									
Jul 10	1997 8:00aı	ŋ							
Secre	etary of Stat	e							

|--|--|

C/O CHARLES S. DAYHOFF. III. ESQUIRE 3830 TAMPA ROAD, SUITE 150 PALM HARBOR FL 34684		3830 TAMPA I	C/O CHARLES S. DAYHOFF, III. ESOUIRE 3830 TAMPA ROAD. SUITE 150 PALM HARBOR FL 34884-3805			3. Date Incorporated or Qualified	3a. Date of Last	Report
						03/28/1990	05/20/1996	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number		Applied For		
21 26					59-2997173	[
Suite, Apt. #, etc. Suite, Apt. #, etc.		#, etc.			5. Certificate of Status Desired	□ \$8.75	Additional	
27					6. Certificate of Status Desired	Fee I	Required	
City & State	6	City & Sta	ile	-	•	6. Election Campaign Financing	\$5.0	O May Be
28					Trust Fund Contribution	Adde	d to Fees	
Zip	Country	Zip		Count	гу	8. This corporation has liability for in	_,	s. 199.032,
24	25	29					Yes No	
	9. Name and Address of Curr	rent Registered Age	nt	8		10. Name and Address of New Reg	pistered Agent	
	HOFF, CHARLES S., III, ESQ.			°	Name			
	D TAMPA RD., SUITE 150			8	2 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
PALI	M HARBOR FL 34684			_				
,				8	3		1	i
				8	City		FL 85 Zij	o Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, F	orida Statutes	s, the abo	ve-named co	rporation submits this statement for the p	urpose of changing	its registered
office or r	egistered agent, or both, in the Sta	ate of Florida. Such ci	hange was au	ilhorized l	by the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	t the appointment a	as registered
l	in terminal with, and accept the ob	mganoria or, aconorii c	.0000, 1101	iou otalui				
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE	Registered A	gent signature requ	uirod when reinsteling)	DATE	
12.	OFFICERS /	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	D] DELETÉ	1.1 TITLE			[_] Change	Addition
NAME	NOLL, CHARLES H.			1.2 NAM				
STREET ADDRESS	s 593 8TH STR 1:			1.3 STRE	ET ADDRESS			
CITY-ST-ZIP				1.4 CITY	ST-ZIP			
TATLE				2.1 TITLE			Change	Addition
NAME] =1,=1,==1, +1, +1, +1, +1, +1, +1, +1, +1, +1, +			2.2 NAM				
STREET ADDRESS	s 593 8TH STR 23			2.3 STRE	ET ADDRESS			
CITY-\$1-ZIP	PALM HARBOR FL 2.4			2. 4 CITY	-ST-ZIP			······
TITLE	. 	L	DELETE	3.1 TITLE			Change	Addition
NAME	.*			3.2 NAM				
STREET ADDRESS				3.3 STRE	ET ADDRESS			
CITY-ST-ZIP				3.4. CITY	- ST - ZIP			
TITLE			DELETE	4.1 TITLE			Change	Addition
NAME				4. 2 NAM	E			
STREET ADDRESS				4.3 STRE	ET ADDRESS			
CITY-ST-ZIP				4.4 CITY				
TITLE			DELETË	5.1 TITLE			☐ Change	Addition
NAME				5.2 NAMI				
STREET ADDRESS				5.3 STRE	ET ADDRESS			
CITY-ST-ZIP				5.4 CITY				
TITLE		L.	DELETE	6.1 TITLE			Change	e 🔲 Addition
NAME	2 ' '			6.2 NAMI				
STREET ADDRESS				6.3 STRE	ET ADDRESS			
CITY-ST-ZIP	1.			6.4 CITY	- ST- 7IP			

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.