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

**PROFIT** CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

STEPCHILD RACING, INC.

1 188/181/ 814		

**FILED** 

May 07 1998 8:00am

Secretary of State

				<u></u> }				
Principal Place of Business Mailing Address			{					
3830 TAMPA ROAD. SUITE 150 3830 TAMPA ROAD. SUI		JITE 150		DO NOT WRITE IN THIS SPA	ACE			
				3. Date Incorporated or Qualified 03/28/1990				
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For			
1 26				59-2997173	Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired See Required				
City & State City & State  28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 29	Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
nt Registered Agent			. 1	<ol><li>Name and Address of New Registered Ag</li></ol>	ent			
		81	Name					
		B2	Street Address	treet Address (P.O. Box Number is Not Acceptable)				
	1	83						
	Ī	B4	City	FL	35 Zip Code			
DAYHOFF, CHARLES S., III, ESQ. 3830 TAMPA RD., SUITE 150 PALM HARBOR FL 34684  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change suthorize agent. I am familiar with, and accept the obligations of Section 607.0505. Florida Sta			City     FL   85   Zip     ve-named corporation submits this statement for the purpose of changing					
•	3630 TAMPA ROAD, SL PALM HARBOR FL 346  2a. Mailing Address 25  Suite, Apt. #, etc. 27  City & State 28  Zip 29  ant Registered Agent  02 and 607.1508, Fiorida State	C/O CHARLES S. DAYHOFF. III. ES 3830 TAMPA ROAD. SUITE 150 PALM HARBOR FL 34684   2a. Mailing Address 26 Suite, Apt. W. etc. 27 Criy & State 28 Zrp Cour 29 30 ont Registered Agent	C/O CHARLES S. DAYHOFF. III. ESOUNG 3830 TAMPA ROAD. SUITE 150 PALM HARBOR FL 34684   2a. Mailing Address 26 Suite, Apt. W. etc. 27 Crity & State 28 Zip Country 29 30 ont Registered Agent  81 82 83 84	C/O CHARLES S. DAYHOFF, III, ESQUIRE 3630 TAMPA ROAD, SUITE 150 PALM HARBOR FL 34684   2a. Mailing Address 26 Suite, Apt. W, etc. 27 City & State 28 Zip Country 29 ant Registered Agent  81 Name 82 Street Address 83 84 City 02 and 607, 1508, Florida Statutes, the above-named corpora	C/O CHARLES S. DAYHOFF, III. ESQUIRE 3830 TAMPA ROAD. SUITE 150 PALM HARBOR FL 34684  2a. Malling Address 2b. Suite, Apl. #, etc. 27 City & State 2c. Crity & State 2c. Country 2d. Trust Fund Contribution 2d. Trust Fund Contribution 2d. This corporation owes or has paid the current Personal Property Tax due June 30. 2d. Name 2d. Name 2d. This corporation owes or New Registered Agent 2d. Name 2d. Street Address (P.O. Box Number is Not Acceptable)  2d. Acceptable of the purpose of the			

		64	City		FL	85 Z	p Code			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE Signature, typed or printed name of registered agent and title. If applicable (NOTE Registered Agent signature required when reinstating)  DATE										
OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES	TO OFFICERS AND	DIRECT	ORS IN 12			
D	DELETE	1.1 TITLE				Chang	e Addition			
NOLL, CHARLES H.		1.2 NAME	Ì				ì			
593 8TH STR		1.3 STREET	ADDRESS							
PALM HARBOR FL	i	1.4 CITY-S	r-zip							
D	DELETE	2.1 TITLE				Chang	e			
BRETTEL, CHARLES W., NI		2.2 NAME					ļ			
593 8TH STR	1	2.3 STREET	ADDRESS				)			
PALM HARBOR FL		2. 4 CITY-5	T-21P							
	DELETE	3.1 TITLE				Chang	e 🔲 Addition			
		3.2 NAME	)				Ì			
		33 STREET	ADDRESS							
		3.4. CITY - S	T-ZIP							
	☐ DELETE	4.1 TITLE				Chang	e 🔲 Addition			
		4. 2 NAME	- 1				ļ			
	1	4.3 STREET	ADDRESS				)			
		4.4 CITY-S	r-ZIP							
	DELETE	5.1 TITLE				Chang	Addition			
	J	5.2 NAME	1							
		5 3 STREET	ADDRESS							
		5.4 CITY-S	r-zip							
	DELETE	6.1 TITLE				Chang	e ☐ Addition			
	I.	6.2 NAME	ļ				ļ			
		6.3 STREET	ADDRESS				ļ			
	egistered agent, or both, in the State of Florida. Such m familiar with, and accept the obligations of, Section Signature, typed or printed name of regularized agent and title II applicable OFFICERS AND DIRECTORS D NOLL, CHARLES H. 593 8TH STR PALM HARBOR FL D BRETTEL, CHARLES W., NI 593 8TH STR PALM HARBOR FL	egistered agent, or both, in the State of Florida. Such change was auth m familiar with, and accept the obligations of, Section 607.0505, Florid Signature, typed or printed name of regulared agent and title II applicative.  OFFICERS AND DIRECTORS  D	to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above egistered agent, or both, in the State of Florida. Such change was authorized by m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  Signature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  DELETE  NOLL, CHARLES H.  593 87H STR  PALM HARBOR FL  DELETE  DELETE  1.1 TITLE  2.2 NAME  593 87H STR  PALM HARBOR FL  DELETE  3.1 TITLE  3.2 NAME  3.3 STREET  3.4 CITY-S  DELETE  4.1 TITLE  4.2 NAME  4.3 STREET  4.4 CITY-S  DELETE  5.1 TITLE  5.2 NAME  5.3 STREET  5.4 CITY-S  DELETE  5.1 TITLE  5.2 NAME  5.3 STREET  5.4 CITY-S  DELETE  5.1 TITLE  5.2 NAME  5.3 STREET  5.4 CITY-S  DELETE  5.1 TITLE  5.2 NAME  5.3 STREET  5.4 CITY-S  DELETE  5.1 TITLE  5.2 NAME	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named of egistered agent, or both, in the State of Florida. Such change was authorized by the corp of tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.    Signature, typed or printed name of registered agent and tale if applicable   (NOTE Registered Agent signature)	to the provisions of Sections 507.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statemen egistered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I here in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    Signature, byted or printed name of requisited agent and title if applicable	In the provisions of Sections 607,0502 and 607,1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of egistered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the apper in familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.    Section 607,0505, Florida Statutes   Section 607,0505, Florida Statutes	The provisions of Sections 607 0:502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing egistered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment mamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.    Suprative typed or printed name of requested agons and total literatures.			

14. Thereby 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 oath; 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 addrage.