SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 JUL -6 AM 8: 18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M60169 (3)

1. Corporation Name
ROAD AMERICA MOTOR CLUB, INC.

Principal Place of Business	Mailing Address
225 ALCAZAR AVENUE CORAL GABLES FL 33134	225 ALCAZAR AVENUE CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/02/1997
3a. Date of Last Report: 01/25/1994
4. FEI Number: 65-0006290 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Same	26 Same
22 Suite, Apt #, etc	27 Suite, Apt #, etc
23 City & State: Same	28 City & State: Same
24 Zip: 33134 — 25 Country: USA	29 Zip: 33134 — 30 Country: USA

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HUTCHINSON, ALBERT N. 3900 LITTLE AVENUE COCONUT GROVE FL 33133	81 Name: Albert N. Hutchinson 82 Street Address (P.O. Box Number is Not Acceptable): 2575 So. Bayshore Drive, #15B 83 84 City: Miami FL 85 Zip Code: 33133

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 Albert N. Hutchinson — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	PD	1 1 TITLE	☐ Change ☐ Addition
NAME	HUTCHINSON, ALBERT N.	1 2 NAME	
STREET ADDRESS	225 ALCAZAR AVE.	1 3 STREET ADDRESS	
CITY ST ZIP	CORAL GABLES FL	1 4 CITY ST ZIP	
TITLE	VD	2 1 TITLE	☐ Change ☐ Addition
NAME	FANTIS, DENNIS M.	2 2 NAME	
STREET ADDRESS	5311 ORDUNA DR.	2 3 STREET ADDRESS	
CITY ST ZIP	CORAL GABLES FL	2 4 CITY ST ZIP	
TITLE	VD	3 1 TITLE	VP, D, Secretary ☒ Change ☒ Addition
NAME	RUDICK, LEE .	3 2 NAME	RUDICK, LEE
STREET ADDRESS	9850 SW 69 AVE	3 3 STREET ADDRESS	7200 SW 129 STREET
CITY ST ZIP	MIAMI FL	3 4 CITY ST ZIP	MIAMI, FL 33156
TITLE	ST	4 1 TITLE	Treasurer, Director ☒ Change ☒ Addition
NAME	WILSON, BETTY J	4 2 NAME	David W. Cash
STREET ADDRESS	310 S.W. 64TH COURT	4 3 STREET ADDRESS	2305 SW 183 Terrace
CITY ST ZIP	MIAMI FL	4 4 CITY ST ZIP	Miramar, FL 33029
TITLE		5 1 TITLE	☐ Change ☐ Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY ST ZIP		5 4 CITY ST ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY ST ZIP		6 4 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 address.

SIGNATURE: [signature] — 6/29/95 — 305-446-9670

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

LEE RUDICK

CR2E034 (3/95)

004134 CP