2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000872

Entity Name: RACERSCARE, INC.

FILED May 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 515 CHERRY STREET SOUTH DAYTONA, FL 321192017 **Current Mailing Address: New Mailing Address:** 515 CHERRY STREET SOUTH DAYTONA, FL 321192017 FEI Number: 33-1006164 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: MIAMI CENTER REGISTERED AGENTS, LLC BORDEN, WILLIAM E PRES. 515 CHERRY STREET 201 S BISCAYNE BLVD S#1700, MIAMI CENTER US MIAMI, FL 33131 US SOUTH DAYTONA, FL 32119 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: WILLIAM E. BORDEN 05/05/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PCEO** () Delete () Change () Addition BORDEN, WILLIAM E Name: Name: 515 CHERRY STREET Address: Address: City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: Title: () Delete Title: () Change () Addition BEROTH, WESLEY Name: Name: Address: 186 BERMUDA RUN Address: City-St-Zip: ADVANCE, NC 27006 City-St-Zip: Title: () Delete Title: () Change () Addition CAMPBELL, CLAY MR. Name: Name: Address: P.O. BOX 3311 Address: City-St-Zip: MARTINSVILLE, VA 241153311 City-St-Zip: Title: () Delete Title: () Change () Addition RICE, R. DON M Name: Name: 242 FLOOR DANIELS BLVD Address: Address: City-St-Zip: CLEMSON, SC 296345709 City-St-Zip: Title: () Delete Title: () Change () Addition BORDEN, BILL Name: Name: 515 CHERRY STREET Address: Address: City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: Title: () Delete Title: () Change () Addition BEROTH, WESLEY Name: Name: Address: 186 BERMUDA RUN Address: ADVANCE, NC 27006 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM E. BORDEN PCEO 05/05/2004