2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2006
Secretary of State

DOCUMENT# N02000001278

Entity Name: BSR RACING SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

2048 COUNTRY CLUB DR.
DAYTONA BEACH, FL 32128

New Principal Place of Business:

2048 COUNTRY CLUB DR.
PORT ORANGE, FL 32128

Current Mailing Address:

2048 COUNTRY CLUB DR.
DAYTONA BEACH, FL 32128

New Mailing Address:

2048 COUNTRY CLUB DR.
PORT ORANGE, FL 32128

FEI Number: 04-3608093 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVE.
DAYTONA BEACH, FL 321152491 US

Name and Address of New Registered Agent:

PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVE.
PORT ORANGE, FL 321152491 US

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: _____ 05/11/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STEVENS, HAROLD I
Address: 2048 COUNTRY CLUB DR.
City-St-Zip: DAYTONA BEACH, FL 32128

Title: D ( ) Delete
Name: STEVENS, DIANE
Address: 2048 COUNTRY CLUB DR.
City-St-Zip: DAYTONA BEACH, FL 32128

Title: D ( ) Delete
Name: SIRKIS, SAMUEL
Address: 2705 AUTUMN LEAVES DR.
City-St-Zip: DAYTONA BEACH, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: STEVENS, HAROLD I
Address: 2048 COUNTRY CLUB DR.
City-St-Zip: PORT ORANGE, FL 32128

Title: D (X) Change ( ) Addition
Name: STEVENS, DIANE
Address: 2048 COUNTRY CLUB DR.
City-St-Zip: PORT ORANGE, FL 32128

Title: D (X) Change ( ) Addition
Name: SIRKIS, SAMUEL
Address: 2705 AUTUMN LEAVES DR.
City-St-Zip: PORT ORANGE, FL 32128

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: HAROLD I STEVENS D 05/11/2006
Electronic Signature of Signing Officer or Director — Date