

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000005863

FILED  
May 05, 2003  
Secretary of State

Entity Name: "O"-TOWN EXPRESS TRACK CLUB, INC.

**Current Principal Place of Business:**

POST OFFICE BOX 681842  
ORLANDO, FL 328681842

**New Principal Place of Business:**

**Current Mailing Address:**  
POST OFFICE BOX 681842  
ORLANDO, FL 328681842

**New Mailing Address:**

FEI Number: 33-1008383      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ANDERSON, ROBERT F  
4432 MALVERN HILL DRIVE  
ORLANDO, FL 32818 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ANDERSON, MCLIN  
Address: POST OFFICE BOX 681842  
City-St-Zip: ORLANDO, FL 328681842

Title: T ( ) Delete  
Name: ANDERSON, ROBERT F  
Address: 4432 MALVERN HILL DR.  
City-St-Zip: ORLANDO, FL 32818

Title: VT ( ) Delete  
Name: COBB, SHARLA  
Address: 505 N. NORWELL ST.  
City-St-Zip: ORLANDO, FL 32835

Title: SD ( ) Delete  
Name: HARGRETT, PATRICIA  
Address: 6216 ORANGE COVE DR.  
City-St-Zip: ORLANDO, FL 32819

Title: PT ( ) Delete  
Name: ANDERSON, MCLIN  
Address: P.O. BOX 681842  
City-St-Zip: ORLANDO, FL 32868

Title: BMGT ( ) Delete  
Name: CALDERON, JULIET  
Address: 3695 LOMOND CT.  
City-St-Zip: APOPKA, FL 32712

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: MOTHERSILL, GERDA  
Address: 1930 LAKE SHORE CIR.  
City-St-Zip: LONGWOOD, FL 32750

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: ANDERSON, MCLIN  
Address: P.O. BOX 681842  
City-St-Zip: ORLANDO, FL 32868

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I 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 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: ROBERT F. ANDERSON

T

05/05/2003

Electronic Signature of Signing Officer or Director

Date