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NONPROFIT CORPORATION ANNUAL REPORT



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

1996	
DOCUMENT #	N02687

(4)

TRACK FLORIDA, INC.  Principal Place of Business  Mailing Address  Michael McIntosh 215 5TH ST STE 300 WEST PALM BCH FL 33401  MEST PALM BCH FL 33401								
US			US			<ol> <li>Date Incorporated or Qualified</li> <li>04/23/1984</li> </ol>	3a. Date of La 03/27	
2. Principal	Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For		
Suite, Ap	ot. #, etc.		Suite, Apt. #, etc.			59-2838739		Not Applicabl
City & State		27		5. Certificate of Status Desired	1 1 +	\$8.75 Additional Fee Required		
3	a.o		City & State			6. Election Campaign Financing	\$5.	<b>00</b> May Be
Zip		Country	Zip	Count	n/	Trust Fund Contribution	Ade	ded to Fees
4	25		29	30	,,	This corporation has liability for in Florida Statutes	ntangible tax under ] Yes <b>₪</b> No	s. 199.032,
	9. Name ar	nd Address of Current	Registered Agent	1001		10. Name and Address of New Re	olstered Agent	
				8	1 Name		Sarata on Maint	
MCINT	OSH, MICHAEI	Ĺ		8:	2 Steam Add	ress (P.O. Box Number is Not Acceptable		<del> </del>
215 FI	FTH STREET, S	SUITE 100		0,	2 SIRREI AGO	ress (P.O. box Number is Not Acceptable	9)	
WEST	PALM BCH FL	33401		8	3			
				6.	4 Crtv			<del></del>
14 5						ration submits this statement for the purp		Zip Code
familiar v SIGNATURE	with, and accept t	he obligations of, Section	617,0503, Florida Statute	ized by the cor as.	poration's boa	ration submits this statement for the purp rd of directors. I hereby accept the appoi	ntment as registere	ed agent. I am
				Off Registered Age	ent signature require	d when reinstating	ГіАТЬ	
		OFFICERS AND	DIRECTORS	IOTE Registered Age	ent signature require		DATE DERS AND DIRECT	ORS IN 12
ITLE	PTST	OFFICERS AND			ent signature require	rt when renstating: ADDITIONS/CHANGES TO OFFIC		
ITLE IAME	MCINTOSH	OFFICERS AND I	DIRECTORS	13. 1.1 TiTLE 1.2 NAME			DERS AND DIRECT	
itle Name Treet address	MCINTOSI 215 FIFTH	OFFICERS AND I I, MICHAEL A ST / STE 300	DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE	T ADDRESS		DERS AND DIRECT	
TITLE NAME STREET ADDRESS CITY - ST- ZIP	MCINTOSH 215 FIFTH WEST PAL	OFFICERS AND I	DIRECTORS  DELETE	13. 1.1 Title 1.2 NAME 1.3 STREE 1.4 CITY	T ADDRESS		CERS AND DIRECT	Addition
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SIGNATURE:

SIGNA FORE AND TYPED ON BAINTED MANE OF SIGNING OFFICER OR DIRECTOR

4/17196 401.832-8845