2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003329

FILED May 16, 2005 Secretary of State

Entity Name: TAMPA BAY SPECIAL VEHICLE TEAM OWNERS ASSOCIATION, INC.

| Current P | rincipal Place of Business: | New Principal Place of Business: |
|--|--|---|
| 24825 US CLEARW | 19 N ATER, FL 33762 | |
| Current M | lailing Address: | New Mailing Address: |
| 24825 US CLEARW | 19 N ATER, FL 33762 | |
| | : FEI Number Applie ce with s. 607.193(2)(b), F.S., the corpo I Address of Current Registered | ration did not receive the prior notice. |
| 5982 31ST ST. PETE | ODEN T CPA TAVENUE NORTH RSBURG, FL 33710 US | ent for the purpose of changing its registered office or registered agent, or both |
| | | |
| in the Stat | e of Florida. | |
| | e of Florida. | istered Agent Date |
| in the State | e of Florida. | istered Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTO |
| in the State | e of Florida. RE: Electronic Signature of Rec | • |
| in the State SIGNATUI OFFICER Title: Name: Address: | e of Florida. RE: Electronic Signature of Reg S AND DIRECTORS: D () Delete PAVLISCSAK, GENE 2655 ULMERTON RD #156 | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: |
| in the State SIGNATUI OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: | e of Florida. RE: Electronic Signature of Rec S AND DIRECTORS: D () Delete PAVLISCSAK, GENE 2655 ULMERTON RD #156 CLEARWATER, FL 33762 US D () Delete STEWART, JACK 2655 ULMERTON RD #156 | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: |

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: GENE PAVLISCSAK D 05/16/2005