2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# N03000005804

Entity Name: SOUTH CAMPUS RACERS ASSOCIATION, INC.

Current Principal Place of Business:

11900 ALDEN RD.
JACKSONVILLE, FL 32246

New Principal Place of Business:

11910 ALDEN RD.
JACKSONVILLE, FL 32246

Current Mailing Address:

11528 OAK PARK DR.
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 38-3684577 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FORTIN, THEODORE M
11541 OAK PARK DR
JACKSONVILLE, FL 32225 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/D	( ) Delete
Name:	FORTIN, THEODORE M	
Address:	11541 OAK PARK DR	
City-St-Zip:	JACKSONVILLE, FL 32225	
Title:	SRVP	( ) Delete
Name:	GRIMES, DOUGLAS	
Address:	3339 LINE JUDGE CT	
City-St-Zip:	JACKSONVILLE, FL 32277	
Title:	D	( ) Delete
Name:	GENCHUR, DAVID	
Address:	6904 HEIDI RD.	
City-St-Zip:	JACKSONVILLE, FL 32277	
Title:	VP/D	( ) Delete
Name:	CLAUS, KRISTIN N	
Address:	11528 OAK PARK DR.	
City-St-Zip:	JACKSONVILLE, FL 32225	
Title:	D	(X) Delete
Name:	FORTIN, JOHN E	
Address:	03642 TROUT AVE	
City-St-Zip:	FRUITLAND PARK, FL 34738	
Title:	D/S	( ) Delete
Name:	BAGLEY, CHRIS	
Address:	6960 TAMPICO RD.	
City-St-Zip:	JACKSONVILLE, FL 32244	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: THEODORE M FORTIN P 04/28/2006
Electronic Signature of Signing Officer or Director — Date