

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008918

FILED
Apr 14, 2009
Secretary of State

Entity Name: THE WAY TO HAPPINESS RACING TEAM, INC.

Current Principal Place of Business:

512 JASMINE WAY
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

PO BOX 754
CLEARWATER, FL 33757

New Mailing Address:

FEI Number: 26-0883491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORMAN, GREG
512 JASMINE WAY
CLEARWATER, FL 33756 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: GORMAN, GREG
Address: 512 JASMINE WAY
City-St-Zip: CLEARWATER, FL 33756

Title: VP () Delete
Name: GORMAN, SUSAN
Address: 512 JASMINE WAY
City-St-Zip: CLEARWATER, FL 33756

Title: VP () Delete
Name: KEENAN, SHIRLEY
Address: 1605 MOUNTAIN ASHE CT.
City-St-Zip: MATTHEWS, NC 28105

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:

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN GORMAN

VP

04/14/2009

Electronic Signature of Signing Officer or Director

Date