

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001270

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** THE MATRIX TRACK CLUB, INC.

**Current Principal Place of Business:**

3411 EAST DELEUIL AVENUE  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

3411 EAST DELEUIL AVENUE  
TAMPA, FL 33610

**New Mailing Address:**

**FEI Number:** 51-0657346

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WATSON, GARY  
3411 EAST DELEUIL AVENUE  
TAMPA, FL 33610 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: WATSON, GARY  
Address: 3411 EAST DELEUIL AVENUE  
City-St-Zip: TAMPA, FL 33610

Title: S ( ) Delete  
Name: WATSON, ANGELA  
Address: 27349 NEW SMYRNA DR  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: T ( ) Delete  
Name: EASY, KIMBLEY  
Address: 8830 DORAL OAKS DRIVE #1910  
City-St-Zip: TAMPA, FL 33617

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

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

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

Title: T (X) Change ( ) Addition  
Name: EASY, KIMBERLY  
Address: 8830 DORAL OAKS DRIVE #1910  
City-St-Zip: TAMPA, FL 33617

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: GARY WATSON

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date