## 2006 NOT-FOR-PROFIT CORPORATION

## **FILED** 2006 08:00 AN

ANNUAL KEPURI					Apr 14, 2000 08:00 <i>P</i>			
DOCUMENT # N35835  1. Entity Name					Se	creta	ry of State	
FLOŔIDA	A EXPRESS TRACK, INC.							
Principal Plac 6619 GEORG BRADENTON	GIA AVE	Mailing Address 6619 GEORGIA AVE BRADENTON, FL 34207		- - - - - - - - - - - - - - - - - - -	<b>*                                    </b>		ii bibli bibili bibilibi bi ibbi	
DO NOT WRITE IN THIS SPAC			CE	01092006 4. FEI Numb 65-017	No Chg-NP	CR2E0	37 (11/05)  Applied For Not Applicable \$8.75 Additional Fee Required	
6619 GEO	6. Name and Address of Current R KENNETH R PRGIA AVE ON, FL 34207	DO NOT WRITE IN THIS SPACE						
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if anotoable.  (NOTE, Registered Agent signature required when reinstating)  DATE								
Filing Fee is \$61.25  Due by May 1, 2006  9. Election Campaign Finan Trust Fund Contribution.				.00 May Be ed to Fees				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D PD PALMER, KENNETH R. 6619 GEORGIA AVE BRADENTON, FL SD PALMER, JACQUELINE 6619 GEORGIA AVE BRADENTON, FL VD PORTER, NATHANIEL 6619 GEORGIA AVE BRADENTON, FL TD BRATTON, CHRISTOPHER 6619 GEORGIA AVE BRADENTON, FL	RECTORS		-	U000 04/28/0 NOT V	VRITE		
TITLE NAME STREET ADDRESS								

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-06 Date

941-756-4-795 Daylime Phone #