


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 AM
Secretary of State

DOCUMENT # N35835 1. Entity Name FLORIDA EXPRESS TRACK, INC.	
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Principal Place of Business 6619 GEORGIA AVE BRADENTON, FL 34207	Mailing Address 6619 GEORGIA AVE BRADENTON, FL 34207
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DO NOT WRITE IN THIS SPACE



04132008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0171631	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PALMER, KENNETH R 6619 GEORGIA AVE BRADENTON, 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee Is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000911914 05/07/08-80059-011 70.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PALMER, KENNETH R. 6619 GEORGIA AVE BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PALMER, JACQUELINE 6619 GEORGIA AVE BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PORTER, NATHANIEL 6619 GEORGIA AVE BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BRATTON, CHRISTOPHER 6619 GEORGIA AVE BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:  **04-17-08** **941-756-4795**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #