2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49948

FILED Feb 23, 2005 Secretary of State

Entity Name: NORTHWEST FLORIDA TRACK CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

POST OFFICE BOX 911 SHALIMAR, FL 32579

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 911 SHALIMAR, FL 32579

FEI Number: 59-3123885 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARDOW, BONNIE 46 LONGWOOD DRIVE SHALIMAR, FL 32579 US

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:

Flackway is Competing of Devictors of Appet

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: BARBA, DIANA Name: WOLFE, EUGENE K Address: 220 ANGLER AVE #10 Address: 105 PINEDALE WAY

City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548

 Name:
 SHOFF, SUE
 Name:
 WOLFE, CHERYL

 Address:
 450 SANDMORE SHORES
 Address:
 105 PINEDALE WAY

City-St-Zip: MARY ESTHER, FL 32569 City-St-Zip: FORT WALTON BEACH, FL 32548

Title: TD () Delete Title: TD (X) Change () Addition Name: MCMAHON, BRIAN Name: MCMAHON, BRIAN

 Name:
 MCMAHON, BRIAN
 Name:
 MCMAHON, BRIAN

 Address:
 12 MAYO STREET
 Address:
 2575 BARRON CT

 City-St-Zip:
 HURLBURT FIELD, FL 32544
 City-St-Zip:
 SHALIMAR, FL 32579

Title: VD () Delete Title: () Change () Addition

 Name:
 LOVE, KIM
 Name:

 Address:
 1791 AUTUMN LANE
 Address:

 City-St-Zip:
 FORT WALTON BEACH, FL 32547
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRIAN T. MCMAHON TD 02/23/2005