

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

**FILED**  
**Mar 07, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N95000000177**

1. Entity Name

TRACK SHACK FOUNDATION, INC.



Principal Place of Business

1104 N. MILLS AVE.  
ORLANDO, FL 32803 US

Mailing Address

1104 N MILLS AVE.  
ORLANDO, FL 32803 US



02142008 No Chg-NP

CR2E037 (4/06)

4. FEI Number

59-3306035

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

CLARK, JEFF B  
1104 N MILLS AVE.  
ORLANDO, FL 32803

**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 applicable

(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. ☐

**\$5.00** May Be  
Added to Fees

1000000851189  
03/25/08-80028-020 61.25

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	CALPEY, JOHN
STREET ADDRESS	4038 BOUNCE
CITY-ST-ZIP	ORLANDO, FL 32812
TITLE	D
NAME	HUGHES, JON
STREET ADDRESS	1623 WYCLIFF DR.
CITY-ST-ZIP	ORLANDO, FL
TITLE	D
NAME	CASEY, NATALIE
STREET ADDRESS	1216 GOLFSIDE DRIVE
CITY-ST-ZIP	WINTER PARK, FL 32792
TITLE	D
NAME	GILMORE, MARTY
STREET ADDRESS	1108 PARKER CANAL CT.
CITY-ST-ZIP	OVIEDO, FL 32765
TITLE	D
NAME	HUGHES, BETSY
STREET ADDRESS	1623 WYCLIFF DR.
CITY-ST-ZIP	ORLANDO, FL 32803
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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Betsy Hughes* Betsy Hughes 3/4/08 4078981313