SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1997

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

21

22

23

24

Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9600005007 (7)

DAYTONA BEACH SPEED FOOTBALL CLUB, INC.

Country

9. Name and Address of Current Registered Agent

25

·	
Principal Place of Business	Mailing Address
100 BENT TREE DRIVE STE 18	100 BENT TREE DRIVE STE 18

2a, Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

29

Zip

FILED Sep 02 1997 8:00am Secretary of State



PERRAS, JOHN E SR 82 Street Address (P.O. Box Number is Not Acceptable) 100 BENT TREE DRIVE STE 18 83 DAYTONA BEACH FL 32114 84 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE TITLE 1.1 TITLE Change Addition PERRAS, JOHN E SR NAME 1.2 NAME 100 BENT TREE DRIVE STE 18 STREET ADDRESS 1.3 STREET ADDRESS DAYTONA BEACH FL 32114 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2.1 TITLE WILLIAMS, TERRY NAME 2.2 NAME **100 BENT TREE DRIVE STE 18** STREET ADDRESS 2.3 STREET ADDRESS DAYTONA BEACH FL 32114 CITY-ST-ZIP 2 4 CITY-ST-ZIP ■ DELETE TITLE Change Addition 31 TATUE NAME Frazian, Betty W 3.2 NAME **100 BENT TREE DRIVE STE 18** STREET ADDRESS 3.3 STREET ADDRESS **DAYTONA BEACH FL 32114** CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE □ DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE TITLE Change 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-7IP

Country

81 Name

30

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 corposed to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 inchanged, or on an attachment with an address.