2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000937

FILED Feb 14, 2005 Secretary of State

Entity Name: AMERICAN YOUTH MOTOR SPORTS TEAM, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	STGATE AVE				
SUITE A-5 WEST PA	5 .LM BEACH, FL	33409			
Current M	lailing Address	:	New Mailing Addre	ess:	
4201 WES	STGATE AVE				
SUITE A-5 WEST PA	5 LM BEACH, FL	33409			
FEI Number	: 65-0736879	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:	
618 EAST	CK, VIRGINIA P OCEAN BLVD FL 34995 US	_			
	e named entity su e of Florida.	ıbmits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATU					
	Electronic	Signature of Registered Ag	ent	Date	
OFFICER	S AND DIRECT	ORS:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	D () E BILANCIO, CARR 705 TUSCALOOS WEST PALM BEA	SA .	Title: Name: Address: City-St-Zip:	() Change () Addition	
Γitle: Name: Address:	D () C CLINNIN, LAURIE 625 ALEMSON LA LAWRENCEVILL	ANE NE	Title: Name: Address: City-St-Zip:	() Change () Addition	
City-St-Zip:			0.t.) 0t 2.p.		
Fitle: Name: Address:	D () E HEWITT, FAYE 1601 GEORGIA A WEST PALM BEA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	HEWITT, FAYE 1601 GEORGIA A WEST PALM BEA ST () E YORK, JOHN 4406 FOREST HI	AVE ACH, FL 33401 Delete LL BLVD	Title: Name: Address:	() Change () Addition () Change () Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	HEWITT, FAYE 1601 GEORGIA A WEST PALM BEA ST () E YORK, JOHN 4406 FOREST HI WEST PALM BEA	AVE ACH, FL 33401 Delete LL BLVD ACH, FL 33406 Delete RNER DRIVE	Title: Name: Address: City-St-Zip: Title: Name: Address:	., .	

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: JOHN A YORK ST 02/14/2005