

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000004546 (4)

1. Corporation Name

UNDISPUTED TRUTH TRACK CLUB, INC.

Principal Place of Business

**935 SE 11TH ST
GAINESVILLE FL 32602**

Mailing Address

**P. O. BOX 804
GAINESVILLE FL 32602**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**WHITEHEAD, MICHAEL L
935 SE 11TH ST
GAINESVILLE FL 32602**

3. Date Incorporated or Qualified

06/08/1997

4. FEI Number

59-3498722

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **P TRIQGS, LEA**
STREET ADDRESS **5229 SW 70TH TERR.**
CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE ☐ DELETE
NAME **V BENJAMIN, PHYLLIS**
STREET ADDRESS **5935 SE CNTY RD. 234**
CITY-ST-ZIP **GAINESVILLE FL 32641**

TITLE ☐ DELETE
NAME **T GRAHAM, CYNTHIA**
STREET ADDRESS **5335 NW 34TH TERR.**
CITY-ST-ZIP **GAINESVILLE FL 32653**

TITLE ☐ DELETE
NAME **S ARMOUND, CONNIE**
STREET ADDRESS **630 SW 10TH LANE**
CITY-ST-ZIP **GAINESVILLE FL 32601**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **T** ☐ Change ☒ Addition
1.2 NAME **Kathy L Cudjo**
1.3 STREET ADDRESS **2130 SE Hawthorne Rd Lot #2**
1.4 CITY-ST-ZIP **GAINESVILLE, FL 32641**

2.1 TITLE **T** ☐ Change ☒ Addition
2.2 NAME **MARY A. LUCAS**
2.3 STREET ADDRESS **2130 SE Hawthorne Rd Lot #12**
2.4 CITY-ST-ZIP **GAINESVILLE, FL 32641**

3.1 TITLE **T** ☐ Change ☒ Addition
3.2 NAME **KENNETH TURNER**
3.3 STREET ADDRESS **1210 SE 19th TERRACE**
3.4 CITY-ST-ZIP **GAINESVILLE, FL 32601**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Michael L. Whitehead (Michael L. Whitehead)** 8-14-98 (352) 372-1143
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
Oct 07 1998 8:00am
Secretary of State



CR2E037 (5/98)