

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004337

Entity Name: R.A.C.E.TEAM INC.

FILED
Aug 20, 2007
Secretary of State

Current Principal Place of Business:

6826 SW 130 LN RD
OCALA, FL 34473 US

New Principal Place of Business:

Current Mailing Address:

6826 SW 130 LN RD
OCALA, FL 34473 US

New Mailing Address:

FEI Number: 63-0853645 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MC DOUGALL, RAFFERTY B
6826 SW 130 LN RD
OCALA, FL 34473 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCDOUGALL, RAFFERTY B MR
Address: 6826 SW 130 LN RD
City-St-Zip: OCALA, FL 34473 US

Title: D () Delete
Name: EDDINGS, MICHAEL P MR
Address: 2250 23 27TH STREET
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: D () Delete
Name: THOMPSON, MARK A MR
Address: 552 NW 82ND CT
City-St-Zip: OCALA, FL 34482 US

Title: D () Delete
Name: MCDOUGALL, RUARI P MR
Address: KASTLENSTRASSE 26A
City-St-Zip: MUNICH, GERMANY, AG 81827 AG

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RB MC DOUGALL

P

08/20/2007

Electronic Signature of Signing Officer or Director

Date