## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 17, 2005 08:00 AM Secretary of State DOCUMENT # N99000005884 A.R.N.I. FOUNDATION, INC. Principal Place of Business Mailing Address 126 W. INTERNATIONAL SPEEDWAY 126 W. INTERNATIONAL SPEEDWAY DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 02112005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3602330 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LINN, NICOLE DO NOT WRITE 126 WINTERNATIONAL SPEEDWAY DAYTONA BEACH, FL 32114 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) Filing Fee Is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by May 1, 2005 Added to Fees 10. OFFICERS AND DIRECTORS TITLE n NAME LINN, NICOLE STREET ADDRESS 126 W. INTERNATIONAL SPEEDWAY CITY-ST-ZIP DAYTONA BEACH, FL 32114 TITLE D 02/17/05-80023-025 61.25 NAME ERTHAL, MICHAEL J STREET ADDRESS 126 W. INTERNATIONAL SPEEDWAY CITY-ST-ZIP DAYTONA BEACH, FL 32114 TITLE NAME ANDLINGER, GERHARD STREET ADDRESS 303 S. BROADWAY DO NOT WRITE CITY-ST-ZIP TARRYTOWN, NY 10591 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

2/11/05 386-257-3030 Date Dayling Phone # SIGNATURE:

12. 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 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 accuracy with all other like empowered.

CITY-ST-ZIP