2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 16, 2007 8:00 am Secretary of State DOCUMENT # N99000005884 01-16-2007 90190 012 ****61.25 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 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 118 N BEACH ST P.O. BOX 1791 Suite, Apt. #, etc 01032007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-3602330 City & State City & State Applied For DAYTONA BEACH DAYTONA BEACH. Not Applicable \$8.75 Additional 5. Certificate of Status Desired Volusia 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LINN, NICOLE 126 W INTERNATIONAL SPEEDWAY DAYTONA BEACH, FL 32114 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 NICOLE LINN, Director Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. (Change ☐ Addition TITLE Delete TITLE LINN, NICOle 118 N BEACH ST LINN. NICOLE NAME NAME STREET ADDRESS, 126 W. INTERNATIONAL SPEEDWAY STREET ADDRESS DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 CITY-ST-ZIP CITY-ST-ZIP NAME EKTHAL, M.Chncl J STREET ADDRESS 118 N BEACH ST TITLE Delete NAME ERTHAL, MICHAEL J 126 W. INTERNATIONAL SPEEDWAY STREET ADDRESS DAYTENABEACH, Fl 32114 CITY-ST-7IP DAYTONA BEACH, FL 32114 CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE ANDLINGER, GERHARD NAME 303 S. BROADWAY STREET ADDRESS STREET ADDRESS City-St-7iP TARRYTOWN, NY 10591 CITY-ST-ZIP TIFLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 address, with all other like empowered.

FILED

386-257-3030