


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 05, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000115686 1. Entity Name OCALA GRAN PRIX, INC.	
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Principal Place of Business 35 SW 57TH AVENUE OCALA, FL 34470	Mailing Address 35 SW 57TH AVENUE OCALA, FL 34470
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DO NOT WRITE IN THIS SPACE



07272005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3703899	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUILFOIL, PAUL J
23 SE 12TH TERR
OCALA, FL 34471

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARRELLANO, JORGE 35 SW 57TH AVENUE OCALA, FL 34470
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 08/05/05-00001-023 550.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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.

SIGNATURE: *Jorge Arrellano* Date: July 27 2005 Daytime Phone #: 352-291-0800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR