

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000082294

Entity Name: B & H MOTORSPORTS, INC.

**FILED**  
**Jun 08, 2006**  
**Secretary of State**

## **Current Principal Place of Business:**

3703 N WASHINGTON BLVD  
SARASOTA, FL 34234

## **New Principal Place of Business:**

## **Current Mailing Address:**

3703 N WASHINGTON BLVD  
SARASOTA, FL 34234

## **New Mailing Address:**

FEI Number: 59-3739260

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

BOSSOLA, THOMAS  
1148-C FRUITCOVE ROAD SOUTH  
JACKSONVILLE, FL 32259 US

## **Name and Address of New Registered Agent:**

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: D ( ) Delete  
Name: BOSSOLA, THOMAS  
Address: PO BOX 24721  
City-St-Zip: JACKSONVILLE, FL 32241

Title: D ( ) Delete  
Name: BARROWS, WILLIAM  
Address: PO BOX 24721  
City-St-Zip: JACKSONVILLE, FL 32241

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ST (X) Change ( ) Addition  
Name: BOSSOLA, THOMAS  
Address: PO BOX 24721  
City-St-Zip: JACKSONVILLE, FL 32241

Title: P (X) Change ( ) Addition  
Name: BARROWS, WILLIAM  
Address: 6342 MALALUKA RD.  
City-St-Zip: NORTH PORT, FL 34287

Title: AS ( ) Change (X) Addition  
Name: BARROWS, CARMEN  
Address: 6342 MALALUKA RD.  
City-St-Zip: NORTH PORT, FL 34287

Title: D ( ) Change (X) Addition  
Name: HOORT, AARON  
Address: 8836 FOUNDERS CIR  
City-St-Zip: PALMETTO, FL 34221

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS BOSSOLA

ST

06/08/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date