FILED May 05, 2003 8:00 am § Secretary of State

05-05-2003 90210 006 ***150.00

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P02000012522 DOCUMENT #

1. Entity Name

ACCELERATED AUTOSPORTS, INC.

Principal Place of Business
14241 60TH ST. NORTH
CLEARWATER FL 33760

Mailing Address

15572 BRISTOL CIRCLE EAST CLEARWATER FL 33764

2. Principal Place of Business 3. Mailing Address 3. Mailing Address				(CERTIONS IN) PRICE HERITORNIA BRAIL ORDIN RUMA HUMAN INDICATOR STATE HERITORNIA HERITORIA HERITORNIA HERITORNIA HERITORNIA HERITORNIA HERITORNIA HERITOR	T (\$20 HOUR PR) BUILD HERW DENN DENN DENN FRANK FILDIÐ HIÐUR DINN HERR TIÐI HEÐI 		
Suite, Apt. #, etc. Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State Savasota, Florida City & State			4. FEI Number Applied For ✓ Not Applicable				
Zip - Country Zip Manatee		Country	5. Certificate of Status Desired				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
ELEY, DONALD A 15572 BRISTOL CIRCLE EAST CLEARWATER FL 33764			1.5	Street Address (P.O. Box Number is Not Acceptable)			
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. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. \$5.00 N Added to F			
10. OFFICERS AND DIRECTORS 11.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ELEY, DONALD A 15572 BRISTOL CIRCLE EAST CLEARWATER FL 33764	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	Donald A. Eley 15470 Darien way Clearwater, Fl. 33764	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	. m. north	☐ Delete	NAME -	vice president Change K Timmil 6. weaver 2113 Hennesen dr. Clearwater F1. 33764	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐	Addition .		
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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)(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 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