

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90276 020 ***158.75

DOCUMENT # P02000022545

1. Entity Name
T. P. MOTOR SPORTS, INC.



Principal Place of Business
15770 89 PLACE N
LOXAHATCHEE FL 33470

Mailing Address
15770 89 PLACE N
LOXAHATCHEE FL 33470

(SAME AS ABOVE) (SAME AS ABOVE)

2. Principal Place of Business
15770 - 89th PL North
Suite, Apt. #, etc.

3. Mailing Address
15770 - 89th PL North
Suite, Apt. #, etc.

City & State
Loxahatchee, FL
Zip
33470
Country
PALM BEACH

City & State
Loxahatchee, FL
Zip
33470
Country
PALM BEACH

4. FEI Number
02-0566482
Applied For
☒ Not Applicable

5. Certificate of Status Desired
☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HANBURY, PATTY M
15770 89 PLACE N
LOXAHATCHEE FL 33470

7. Name and Address of New Registered Agent

Name
TERRY HANBURY, JR.
Street Address (P.O. Box Number is Not Acceptable)
15770 - 89th PL North
City
Loxahatchee
FL
Zip Code
33470

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
TERRY HANBURY, JR.
Signature, typed or printed name of registered agent and title if applicable.
(NOTE: Registered Agent signature required when reinstating)
DATE
1-31-03

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 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE President HANBURY, PATTY M 15770 89 PLACE N LOXAHATCHEE FL 33470 Secretary	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Terry Hanbury JR 15770 - 89th PL N Loxahatchee, FL 33470 President Treasurer	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Patty Hanbury from President to Vice Pres	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Terry Hanbury from V.P. to President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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: P. M. Hanbury
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DATE
1/31/03
(561) 312-1771

CR2E034 (10/02)