

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000060813

Entity Name: FINISHLINE PARK, INC.

FILED
Jul 21, 2008
Secretary of State**Current Principal Place of Business:**221 FENTRESS BLVD
DAYTONA BCH, FL 32114**New Principal Place of Business:****Current Mailing Address:**217 FENTRESS BLVD
DAYTONA BCH, FL 32114**New Mailing Address:**

FEI Number: 03-0457831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:SCHWARZ, RICHARD
221 FENTRESS BLVD
DAYTONA BCH, FL 32114 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: SCHWARZ, RICHARD
Address: 295 COQUINA AVE
City-St-Zip: ORMOND BCH, FL 32174Title: D () Delete
Name: SCHWARZ, RALPH L JR.
Address: 12 NOTTINGHAM DR
City-St-Zip: ORMOND BCH, FL 32174Title: D () Delete
Name: SCHWARZ, RHONDA
Address: 12 NOTTINGHAM DR
City-St-Zip: ORMOND BCH, FL 32174Title: D () Delete
Name: SCHWARZ, STEPHANIE
Address: 295 COQUINA AVE
City-St-Zip: ORMOND BCH, FL 32174Title: D () Delete
Name: SCHWARZ, JAMES R
Address: 1201 CARRINGTON TERR
City-St-Zip: JOPLIN, MO 64804**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P/D (X) Change () Addition
Name: SCHWARZ, RICHARD
Address: 295 COQUINA AVE
City-St-Zip: ORMOND BCH, FL 32174Title: VP/D (X) Change () Addition
Name: SCHWARZ, RALPH L JR.
Address: 12 NOTTINGHAM DR
City-St-Zip: ORMOND BCH, FL 32174Title: S/D (X) Change () Addition
Name: SCHWARZ, RHONDA
Address: 12 NOTTINGHAM DR
City-St-Zip: ORMOND BCH, FL 32174Title: TR/D (X) Change () Addition
Name: SCHWARZ, STEPHANIE
Address: 295 COQUINA AVE
City-St-Zip: ORMOND BCH, FL 32174Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: STEPHANIE SCHWARZ

TR

07/21/2008

Electronic Signature of Signing Officer or Director

Date