PO4000117139

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
,
(Document Number)
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PALLAHASSEE, FLORIDA

Ps 7/26/00

RICHARD W. TAYLOR, P.A.

ATTORNEY AT LAW 112 NORTH FLORIDA AVENUE DELAND, FLORIDA 32720

RICHĄRD W. TAYLOR BOARD CERTIFIED IN REAL PROPERTY MICHAEL P. NORDMAN

(386) 734-2558 FAX (386) 734-4579 SIDNEY H. TAYLOR RETURED:

July 21, 2005

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Ultimate Motorsports, Inc.

Dear Division:

Please find enclosed a check for \$70.00, an Officer/Director Resignation for a Corporation, and a Statement of Change of Registered Office or Registered Agent or Both for Corporations.

Please feel free to call if you have any questions.

Very truly yours,

1. Truth of Number

Michael P. Nordman

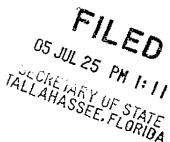
TRANSMITTAL LETTER

Ultimate Motorsports, Inc.
(Name of Corporation) SUBJECT: DOCUMENT NUMBER: P04000117139 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: David G. Curtis (Name of Person) Ultimate Motorsports, Inc. (Name of Firm/Company) 4726 Stonybrook Lane (Address) Orlando, FL 32808 (City/State and Zip Code) For further information concerning this matter, please call: (386) 734-2558 Michael P. Nordman (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations 409 E. Gaines Street P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32399

TO:

Amendment Section
Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



	I, <u>Chad L. Newman</u>		, heret	y resign as	Director (Title)		•
of .	Ultimate Motor	sports, Inc. (Name of Corpo	oration)			<u></u>	
	P004000117139 (Document Number, if know	, a corporat	tion organized	under the la	ws of the Sta	ate of	
	Florida		i v izni en		-	•	- <u>.</u> .
		1 I New		de des	<u>. 14 4 .</u>	٠, ٠	المعيد
	(Signar	ture of resigning	officer/director)			
		Chad L. New	man				

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314