2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2006
Secretary of State

DOCUMENT# P04000155685

Entity Name: PBOC MOTORSPORTS CLUB, INC.

Current Principal Place of Business:

7 TRILBY BR
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

7 TRILBY BR
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 20-1868140 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TURNAGE, ROBERT B
7 TRILBY BR
LONGWOOD, FL 32779 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VARELA, ROBERT M
Address: 1935 NW 49TH COURT
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: VP ( ) Delete
Name: TURNAGE, ROBERT B
Address: 7 TRILBY BR
City-St-Zip: LONGWOOD, FL 32779 US

Title: T ( ) Delete
Name: SCHWARZMANN, JOANNE F
Address: 7 TRILBY BR
City-St-Zip: LONGWOOD, FL 32779 US

Title: VP ( ) Delete
Name: RUTENBERG, MARK
Address: 1217 TIFFINY AVE. SE
City-St-Zip: PALM BAY, FL 32909 US

Title: S ( ) Delete
Name: RUTENBERG, AMY
Address: 1217 TIFFINY AVE SE
City-St-Zip: PALM BAY, FL 32909 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: RUTENBERG, MARK
Address: 1305 PARKSIDE PLACE
City-St-Zip: INDIAN HARBOR BEACH, FL 32937 US

Title: S (X) Change ( ) Addition
Name: RUTENBERG, AMY
Address: 1305 PARKSIDE PLACE
City-St-Zip: INDIAN HARBOR BEACH, FL 32937 US

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: JOANNE F SCHWARZMANN T 02/01/2006

Electronic Signature of Signing Officer or Director Date