

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000019754

FILED
Apr 30, 2007
Secretary of State

Entity Name: TRACK INVESTMENTS, INC.

Current Principal Place of Business:

425 SOUTH COMMERCE AVE.
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

425 SOUTH COMMERCE AVE.
SEBRING, FL 33870

New Mailing Address:

FEI Number: 20-2328621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWAINE, ROBERT S
425 SOUTH COMMERCE AVE.
SEBRING, FL 33870 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: D () Delete
Name: SWAINE, ROBERT S
Address: 425 SOUTH COMMERCE AVE.
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: CARLSON, JEFFREY D
Address: 3531 US HWY. 27 SOUTH
City-St-Zip: SEBRING, FL 338705426

Title: D () Delete
Name: ANDREWS, DANIEL F
Address: 3531 US HWY. 27 SOUTH
City-St-Zip: SEBRING, FL 338705426

Title: D () Delete
Name: ANDREWS, JASON L
Address: 3531 US HWY. 27 SOUTH
City-St-Zip: SEBRING, FL 338705426

Title: D () Delete
Name: GRIMM, GORDON
Address: 3531 US HWY. 27 SOUTH
City-St-Zip: SEBRING, FL 338705426

Title: D () Delete
Name: CONWAY, GEORGE
Address: 3531 US HWY. 27 SOUTH
City-St-Zip: SEBRING, FL 338705426

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

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

Title: () 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: JEFF CARLSON

TREA

04/30/2007

Electronic Signature of Signing Officer or Director

_____ Date