

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000029688

**FILED**  
**Jan 17, 2011**  
**Secretary of State**

**Entity Name:** ALLIED RACE MANAGEMENT, INC

**Current Principal Place of Business:**

815 ARLINGTON BLVD.  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

815 ARLINGTON BLVD.  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

**FEI Number:** 26-2379573

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NESMITH, BRIAN A  
3801 W. LAKE MARY BLVD., STE 119  
LAKE MARY, FL 32746 US

**Name and Address of New Registered Agent:**

NESMITH, BRIAN A  
815 ARLINGTON BLVD  
ALTAMONTE SPRINGS, FL 32701 US

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: BN

01/17/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NESMITH, BRIAN A  
Address: 815 ARLINGTON BLVD.  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

I hereby 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 all other like empowered.

SIGNATURE: BRIAN NESMITH

PRES

01/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date