## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P19724

(4)

## CATOCTIN INTERNATIONAL RACING CORPORATION

Principal Place of Business Mailing Address  BOX 219 UPPERVILLE VA 22176 US US						-		
i us I			US					3. Date Incorporated or Qualified
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For
21				26				<b>54-1463701</b> Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State				City & State				6. Election Campaign Financing \$5.00 May Be
23				28				Trust Fund Contribution Added to Fees
Zιρ	Zip Country			Zip Cou		ountry		8. This corporation has liability for intangible tax under s. 199.032.
24	25		29					Florida Statutes 🔲 Yes 🔀 No
		and Address of Curr	rent Regis	tered Agent		61		10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM						"	Name	
1200 S. PINE ISLAND ROAD PLANTATION FL 33324						82	Street A	Address (P.O. Box Number is Not Acceptable)
PLAI	NIAHUN F	L 33324				83		
						84	City	85 Zip Code
			· · · · · · · · · · · · · · · · · · ·					FL
11. Pursuant office or r	to the provis	sions of Sections 607 0 aent or both in the St	1502 and 6 ate of Flori	07.1508, Florida Stati da, Such change was	utes, the s authoriz	above zed by	named c the corn	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. La	m familiar w	ith, and accept the ob	ligations o	f. Section 607.0505, F	Florida S	tatules	3.	,,,,,,,, .
SIGNATURE								
Signature synthetic perilled partie of registered agent a  12. OF FICERS AND							int signature re	a required when reinstaling)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
Title	CDP	Officero	MAD DITE	DELETE		I TITLE		Change Addition
NAM(		NE, BERTRAM R.		_		NAME		v <u>-</u>
STREET ADDRESS	ROUTE 7						ADDRESS	
CITY ST ZIP	UPPERVI					CITY-S		
HILF	DV			☐ DELETÉ		TITLE	1.2"	Change Addition
NAME:	FIRESTO	NE, DIANA J.			2.2	NAME		
STREET ADDRESS	ROUTE 7				23	STREET	ADDRESS	
CITY - S1 - ZIP	UPPERVI	ILLE VA			2	4 CHY- S	ST - ZiP	
Tille	VP			☐ DELETE	3 1	TITLE		☐ Change ☐ Addition
NAME		ARDO, RICHARD F			3.2	NAME		
STREET ADDRESS		X 219, ROUTE 719			3.3	STREET	ADDRESS	
CHY-ST-ZIP	UPPERVI	LLE VA				I. CITY - S	ST-ZIP	
TIFLE	ļ			L DELETE		TITLE	ļ	Change Addition
NAME					4.3	2 NAME	•	•
STREET ADDRESS							ADDRESS	
CHY-ST ZIP				Driere		CITY-S	T-ZIP	Change Lad Blace
1 TITLE				☐ DELETE		I TITLE		Change Addition
NAME						NAME		
STREET ADDRESS							ADDRESS	
CITY - \$1 - 7dP	ļ			DELETE		CITY-S	1-ZIP	Change Addition
TOLE	}							La onunge La roomon
NAME CLOSET ADDRESS						NAME	AUDDECC	
STREET ADDRESS					0.3	S & I KEEL	ADDRESS	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**FILED** 

Mar 26 1997 8:00am

Secretary of State