FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P92000009360 (8)**

1. Corporation Name

DANKA MOTORSPORT CORPORATION

Principal Place of Business
~~1836 WOODWARD ST~~ 694 Oak Hollow Way
~~ORLANDO FL 32803-4295~~ Altamonte Springs
US FL 32714

Mailing Address
~~1836 WOODWARD ST~~ P.O. Box 5923
~~ORLANDO FL 32803-4295~~ Winter Park, FL 32793
US

3. Date Incorporated or Qualified: 12/04/1992	3a. Date of Last Report: 02/14/1995
4. FEI Number: 59-3455252	Applied For / Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business
21 694 Oak Hollow Way
22 Suite, Apt. #, etc.
23 City & State: Altamonte Springs FL
24 Zip: 32714 25 Country: US

2a. Mailing Address
26 P.O. Box 5923
27 Suite, Apt. #, etc.
28 City & State: Winter Park, FL
29 Zip: 32793 30 Country: US

9. Name and Address of Current Registered Agent

TAYLOR, WAYNE
694 OAK HOLLOW WAY
ALTAMONTE SPRINGS FL 32714

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Signature of a corporate officer or director of the corporation | Signature of Registered Agent (signature required when not stating) | DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	TAYLOR, WAYNE R.
STREET ADDRESS	694 OAK HOLLOW WAY
CITY, ST, ZIP	ALTAMONTE SPRINGS FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	

☐ Change ☐ Addition

14. I do hereby certify that the information supplied on this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: 2-8-96 407 578 4669

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #

CR2E034 (12/95)