2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000075796 1. Entity Name



FILED Apr 28, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

3622 WEST INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32124

MANN & SEVERSON, INC.

3622 WEST INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32124



01262008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3109235

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SEVERSON, VIVIAN L 3622 WEST INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32124

DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the plions of registered agent.	ourpose of changing its registere	ed office o	r registered agent, or bo	oth, in the State of Florida. I am familiar with, and acce	ot
			d Agent signa	ture required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000325672 05/20/08-80035-018 150.00	
10. OFFICERS AND DIRECTORS			,			ia i
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SEVERSON, VIVIAN L 3622 W. INTERNATIONAL SPEEDWA DAYTONA BEACH, FL 32124	Y BLVD.				1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANN, CLARENCE B 3622 W. INTERNATIONAL SPEEDWA DAYTONA BEACH, FL 32124	Y BLVD.	·	s tre option (file table) in Foregoese state expressed		
TITLE NAME						,

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like, empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4-25-08

386.255.631