## 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 #	P93000082595	(8)
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OCALA SPEEDWAY, INC.

Principal Place of Business

Mairing Address



9050 N.W. GAINESVILLE ROAD OCALA FL 33476		9050 N.W. GAINESVILLE ROAD OCALA FL 33476				
					3. Date Incorporated or Qualified 11/15/1993	3a. Date of Last Report 04/03/1995
2. Principal Pla	ce of Business	3 2a. Mailing Address	_		4. FEI Number	Applied For
2. Principal Place of Business 21 9050 N. W. Shinsulus 26 S. Am E. Suite Apt. #, etc.		Œ_		65-0447921	Not Applicable	
Suite Apt. #, etc. Suite, Apt. #  22 27			#, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
		City & State			6. Election Campaign Financing	\$5.00 May Be
23 OCALA 5- 28		77		Trust Fund Contribution	Added to Fees	
Zip 24 344	76 25 MARION	29	Zip Country		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No	
24 317	9. Name and Address of Current	a a kamerika arang merupakan mengangan mengan	[30]		10. Name and Address of New F	
		······································	8	1 Name		
PITRE, F	PAUL		9	2 Street Ad	dress (P.O. Box Number is Not Acceptat	sie)
9050 N.W. GAINESVILLE ROAD			[		diess (i.e. box rambor to not receptate	,,,,
OCALA	FL 33476		٤	3		
			E	4 City		FL 85 Zip Code
11. Pursuant to	o the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the above	e-named corp	poration submits this statement for the pu	rpose of changing its registered office
familiar with	h, and accept the obligations of Scoti	on 607.0505, Florida Statute	S.	rporation's bi	pard of directors. Thereby accept the app	omment as registered agent. Fam
SIGNATURE _	D put L - 3 - 0 ( k e A Signature, typod or printed name of registered agains	and ble if applicatio. (N	OTE: Flagistered A	gant signatura regi		1/30/96
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	A DE MANAGE DE LA CONTRACTOR DE LA CONTR
TITLE	D	DELETE	1. 1 TUT	·	•	Change Addition
NAME	PITRE, PAUL		1.2 NAM			
STREET ADDRESS	9050 N.W. GAINESVILLE RD.		1	ET ADDRESS		Į l
CHY-ST-ZIP TITLE	OCALA FL 33476	[ ] DELETE	2 1 70%	- ST-ZIP		Change Addition
NAME			2.2 NAM			
STREET ADDRESS			1	EL1 ADDRESS		
CITY-ST-7IP			2.4 0111	-\$1-ZIP		
TITLE		DELETE	3 1 TI1	.Ē		Change Addition
NAME			3.2 NAN	IE		
STREET ADDRESS			3 3. \$1F	SET ADDRESS		
CITY-S1-ZIP	<del></del>			'-ST-ZIP		
TITLE		DELETE	4 1 1 17			Change Addition
NAME			4.2 NAN	1		
STREET ADDRESS				EET ADDRESS		
CITY-S1-ZIP TITLE		[] DELETE	4.4 CITY 5. 1 TH	'- \$1 - ZIP	1	Change   Addition
NAME		Писси	5.2 NAM			C Charge C Hooven
STREET ADDRESS				EF1 ADDRESS		
CITY-ST-ZIP				7-S1-ZIP		
TITLE		DELETE	6. 1 TIT			Change Addition
NAME		<del></del>	6 2 NAM			<del></del>
STREET ADDRESS			6 3 STR	EET ADDRESS		
CITY-ST-ZIP			6.4 CIT	r-ST-ZIP		
4.4	The second secon	141 Al. 1- 401 - 1 1 1 1 2 2 4 2			for the exemption stated in Caption 110	07/2)/Id Florida Ctatutos I futbor

I do hereby certify that the information supplied with 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 early it 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 AND TYPES OR PRIVITED NAME OF SIGNING OFFICER OR DIRECTOR