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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000007225 (3)

GRANDSTAND RACING APPAREL, INC.

Apr 15 1998 8:00am Secretary of State

FILED

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Principal Place of Business Mailing Address						T SATURDI IIA IASIE OSAN ADIN BANK BANK ADIN ADIN IBDIA MANA MANA MANA	
7850 PARK SHORE DRIVE STE #203 NAPLES FL 34103		850 PARK SHORE DRIVE STE #203 NAPLES FL 34103	STE #209 NAPLES FL 34103			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
US		US				01/20/1994	
2. Principal Place of Business 2a. Mailing Add			\$			4. FEI Number Applied For	
21 26						65-0481442 Not Applicable	
Suite, Apt #, etc. Suite, Apt. #, etc.						\$ Cortificate of Status Decired \$8.75 Additional	
22			27			Fee Required	
City & St	ate	—	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23 Zip	28		Coun	trv	_	Trust Fund Contribution	
24	25		30	,		Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent	
W	VHITELAW, JENNIFER L			11	Name		
	50 PARK SHORE DRIVE		Ε	82 Street Address (P.O. Box Number is Not Acceptable)			
S		Ľ	\perp				
N	IAPLES FL 34103		1	13			
			1	4 (City	85 Zip Code	
						FL C P P P P P P P P P	
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.							
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registered	event and title if evolvable (NOTE:	Panistered :	Anant (signature rec	quired when reinstating) DATE	
12.		AND DIRECTORS	13.	-	ang. Azione vo.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITE	E		Change Addition	
NAME	MCCONNELL, DAVID W		1.2 NAME				
STREET ADDRESS		•	1.3 STR	EET AD			
CITY-ST-ZIP	LEHIGH ACRES FL		1.4 CITY	-ST-	ZIP	LENIGH ACRES, FL, 33972	
TITLE	VP	☐ DELETE	2.1 TITLE			Change Addition	
NAME	MCCONNELL, LEAH H.		2.2 NAME				
STREET ADDRESS	1 100 - 101 111 111		2.3 STREET			, march 10 4 50 2 2077	
CITY-ST-ZIP	LEHIGH ACRES FL	DELETE	2. 4 CIT		ZIP	LEWICH ACRES, FL. 33972 Change Addition	
TITLE		LI OECETE	3.1 TITL 3.2 NAM			Change Li Aconton	
NAME CERCE ANDRES	c		3.3 STREET		NUBERS		
STREET ADDRESS CITY-ST-ZIP			3.4. CIT				
TITLE		☐ DELETE	4.1 TITL			☐ Change ☐ Addition	
NAME		_	4.2 NAME				
STREET ADDRESS	s		4.3 STR	EET AD	DORESS		
CITY-ST-ZIP			4.4 CITY	(-ST-	ZIP		
TITLE		☐ DELETE	5.1 TITL	E		☐ Change ☐ Addition	
NAME			5.2 NAM	Æ			
STREET ADDRESS	s		5.3 STR				
CITY-ST-ZIP		DELETE	5.4 CITY		ZIP	Change Additio	
TITLE		☐ DELETE	6.1 TITL			Li Change Li Adoltol	
NAME			6.2 NAA		NODE CO.		
STREET ADORES	5		6.3 STR				
CITY-ST-ZIP	v certify that the information supplied	with this filing does not qualify for	6.4 CITY			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 chapped, or on an attachment with an address.							

(941) 368-2233