FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Feb 22, 2001 8:00 am DOCUMENT # **P94000065660 Secretary of State** U.S.A. INTERNATIONAL SPEEDWAY, INC. 02-22-2001 90130 024 ***150.00 Principal Place of Business Mailing Address 125D COMMERCE DR 3401 OLD POLK CITY ROAD LAKELAND FL 33809 FAYETTEVILLE GA 30214 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 58-2135280 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required = 7. Name and Address of New Registered Agent -- -- 6. Name and Address of Current Registered Agent THE PRENTICE HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST. TALLAHASSEE FL 32301 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE ☐ Change MARTINO, WILLIAM JR. NAME NAME STREET ADDRESS 110 COTTONTRAIL LN STREET ADDRESS CiTY-ST-ZIF CITY-ST-ZIP WINTER HAVEN FL 33880 TITLE ☐ Delete TITLE ☐ Change Addition NAME ABBOTT, KEN L NAME STREET ADDRESS STREET ADDRESS 1000 NATURALLY FRESH BLVD CITY-ST-ZIP CITY-ST-78 ATLANTA GA 30349 TITLE AS_ ---- Delete - --NAME KRAUS, MIKE NAME STREET ADDRESS 125 D COMMERCE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **FAYETTEVILLE GA 30214** Addition TITLE Delete TITLE ☐ Change TERRY C HARTLEY NAME NAME STREET ADDRESS 1001 VALRICO LK RD STREET ADDRESS CITY-ST-7IP CITY-ST-7IP VALRICO FL 33594 ☐ Addition TITLE ☐ Detete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I 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 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 11 or Block 12 if

SIGNATURE: Mike Lau Mike Kraus 2-19-01 770 719 0204

changed, or on an attachment with an address, with all other like empowered.