FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLOHIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

1996 DIVISION OF CORPORATIONS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

DOCUMENT # P95000007011 (6)

DOUG PITMAN MOTORSPORTS, INC.						 	 	
Principal Place o	of Business	Mailing Ad	dress					
6802 DERWEN PENSACOLA		6802 DERWENT CIR. PENSACOLA FL 32506						
						3. Date Incorporated or Qualified	3a. Date of La	st Report
2. Principal Plac	no of Purinage	[0- 14-3	A alaba a a a			01/26/1995 4. FEI Number	N/A	
		2a. Mailing Address 26 P. O. Box 3847					Applied For Not Applicable	
Suite, Apt. #.	<u>S. Fairfield Dr</u>	1 26 P. O. Box 3847 Suite Apt. #, etc				59-3286076	\$8.75 Additional	
Pensacola, FL			(mm)			5. Certificate of Status Desired	1 1 7 -	ee Required
City & State		City & State				6. Election Campaign Financing	\$5	5.00 May Be
23 32506		28 325	28 32516-3847			Trust Fund Contribution	Added to Fees	
Zip Country 25		Ζιρ 29		Gountry 30		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No		
	9. Name and Address of Curre	ent Registered A	gent			10. Name and Address of New R	egistered Agent	
				81	Name			
PITMAN.	DOUGLAS R				Street Arld	iress (P.O. Box Number is Not Acceptable)		
6802 DE	RWENT CIR.					poless in the post to the trace page.		
PENSAC	OLA FL 32506			83				
				84	City		85	Zip Code
							FL!	
or registere	of the provisions of Sections 607.056 diagent, or both, in the State of Flo i, and accept the obligations of, Se	onda. Such change	 was authorize 	s, the above r id by the corp	ramed corpo oration's hoa	ration submits this statement for the pur and of directors. Thereby accept the appo	pose of changing pintment as registi	its registered office ered agent. I am
SIGNATURE	ignature. Typical or printers manife of registered age	ertanothe fappilison	(+4/1)	S. Bugstand Ages	S sign at ite require	of where remarkating	DATE	
12.	OFFICERS A	ND DIRECTORS				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D] OFLETE	1 1 FILE	F		🚺 Cha	nge 🔲 Addition
NAME	Pitman, douglas r			1.2 NAME 1.3 STREET ADDRESS				
STREET ADDRESS	6802 DERWENT CIR.							
CITY-ST-ZIP	PENSACOLA FL 32506	E COLOR		1.4 CHY+S1+7IF			PTR 0:	F
TITLE	D	☐ DELETE		2 1 TiTLE V		<i>I</i>	X Cha	nge 🔲 Addition
NAME	PITMAN, RICHARD A			2.2 NAME				
STREET ADDRESS		7185 SCHWAB CIR.		2.3 STHEET ADDRESS				
CITY - ST - 7IP TITLE	PENSACOLA FL 32504	ACULA FL 32504		2.4 C/TY - ST - Z/P 3.1 T/T-LE			□ Cha	nge Addition
NAME		_	J	3.2 NAME				go [] /Mana
STREET ADDRESS				33 STREET	LAODRESS			
CITY - ST - ZIP				34 CITY - S				
TITLE			DELETE	4 1 11 LE			☐ Cha	nge 🔲 Addition
NAME				4.2 NAME)			
STREET ADDRESS				4.3 STHEET	ADDRESS			
CITY - ST - ZIP				4.4 CHTY - S	iT - ZIP			
TITLE] DELETE	5 1 HTLE			☐ Cha	nge 🔲 Addition
NAME				5.2 NAME.				
STREET ADDRESS				5 3 STREET				
CITY - ST - ZIF		□ DELETE		5.4 CITY - S	i1 - ZIP	FT 2		one [] Adding
TITLE		L	DETT E	6 1 TITLE			☐ Cha	nge 🔲 Addition
NAME CORRET ADDRESS				6.2 NAME	ADDRESS			
STREET ADDRESS				6 3 STREET				
CITY-ST-ZIP 14. I do hereby	certify that the information supplie	ed with this filing is	voluntariiv furni	64 City - S shed and doe		for the exemption stated in Section 119.	.07(3)(k), Florida S	itatutes I further
certify that oath: that I	the information indicated on this ar	nnual report or sup rooration or the rec	plemental annu ceiver or trustee	ial report is tru	ue and accur	ate and that my signature shall have the his report as required by Chapter 607, Fl	same legal effect	as if made under

July 16, 1996 (904) 456-3552