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FILED
Mar 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000049342 (5)

1. Corporation Name

ROCK N ROLL RACEWAY OF BREVARD, INC.



Principal Place of Business 3091 DIXIE HWY. NE PALM BAY FL 32905	Mailing Address 3091 DIXIE HWY. NE PALM BAY FL 32905
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3095 DIXIE HWY, NE Suite, Apt. #, etc. 22 City & State 23 PALM BAY, FLORIDA Zip Country 24 32905 25		2a. Mailing Address 26 3095 DIXIE HWY, NE Suite, Apt. #, etc. 27 City & State 28 PALM BAY, FLORIDA Zip Country 29 32905 30		3. Date Incorporated or Qualified 06/21/1995	
		4. FEI Number 59-3317749		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

ROBERTS, HAROLD E
3091 DIXIE HWY. NE
PALM BAY FL 32905

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	Y
NAME	ROBERTS, HAROLD E	1.2 NAME	ROBERTS, KEITH A.
STREET ADDRESS	3091 DIXIE HWY. NE	1.3 STREET ADDRESS	3101 DIXIE HWY, NE
CITY-ST-ZIP	PALM BAY FL 32905	1.4 CITY-ST-ZIP	PALM BAY, FLORIDA 32905
TITLE	D	2.1 TITLE	
NAME	ROBERTS, MARILYN Y	2.2 NAME	
STREET ADDRESS	3091 DIXIE HWY. NE	2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL 32905	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 changed, or on an attachment with an address.

SIGNATURE:

Harold E. Roberts

HAROLD E ROBERTS

03/19/98

407-725-2118

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Optional Page # 0105625

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