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 # P95000075162 (4)

RACE ROCK OF ORLANDO, INC.

ST. LOUIS MQ 63105-3752

Principal Place of Business Mailing Address						- I 188/2001 IIO FOIDT DIZIT 80211 80211 40211 40211 16001 DIZU IIATO BIZIT FLEX 1004			
8986 INTERNATIONAL DRIVE 8986 INTERNATIONAL DRIV									
ORLANDO FL			ORLANDO FL 32819						
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qual	ified		
						09/28/1995			
2. Principal Place of Business		2a. Mailing Addre	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26	26			59-3336643		No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A		
2		27				C. Germoute of States Bosine	·	Fee Re	quired
City & State)	City & State	City & State			6. Election Campaign Finance	ing	\$5.00	May Be
3		28	·			Trust Fund Contribution		Added to	
Zip	Country	7 _{(P}		Country		8. This corporation owes or h	as paid the d		
4	25 29		30			Personal Property Tax due Juno 30. 🔲 Yes 🔲 No			
	9. Name and Address of	Current Registered Agent				10. Name and Address of No	w Registere	d Agent	
***	LLAHASSEE FL 32301			83	- 				
				84	City		F	85 Zip C	Code
office or re agent. I an SIGNATURE	egistered agent, or both, in the n familiar with, and accept the	e State of Florida. Such chang e obligations of, Section 607.0	ge was auth)505, Florida	norized by a Statutes	the corpora	poration submits this statement for lion's board of directors. I hereby	accept the a	of changing its ppointment as i	s registered registered
12,	Signature, typed or pricted name of regu-	RS AND DIRECTORS	(NOTE Re	gistered Agra	il signature requi	ired when reinstalling) ADDITIONS/CHANGES TO	DATE OFFICEDS A	ND DIRECTOR	C IN 10
TITLE	PSD	T DE	FTF	1.1 TITLE			DI FILENS A	Change	Addition
i	MOORE, ROBERT B	ניין ויני	LI, IL			reasurer		☐ Cultinge	DEJ MOUNTUI
NAME	·			1.2 NAME		tal Policinal Roys S	oite 100		
8000 MARYLAND AVENUE, SUITE 375 ST LOUIS MO 63105-3752			1.3 STREET ADDRESS		ADDRESS 29	arry Cate 191 Principal Row, S clando, FL 3283	V, , — ,		
CITY-ST-ZIP			£1E	1.4 CITY - ST	-ZIP OV	ciando, FL 3283	<u></u>	Channe	Addition
1/TLE	CTD	☐ DEC	t IC.	2.1 TITLE	1			Change	
NAME	NEWMAN, ANDREW E			22 NAME	ţ				
STREET ADDRESS	8000 MARYLAND AVEN	NUE, SUITE 375		23 STRLET	ADDRESS				

2.4 CITY-ST-ZIP

3.4. CITY - ST - ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - \$1 - ZIP

3.1 THILE

3.2 NAME
3.3 STREET ADDRESS

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 THILE

5.2 NAME

6.1 TITLE 6.2 NAME

14. CRY-SI-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 frusted 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.

CICNATUDE.

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-S1-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

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4/6/28

FILED

Apr 14 1998 8:00am

Secretary of State

Change

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Addition

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Addition

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