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 # P96000021437 (4)

TRACK MAINTENANCE, INC.

Principal Place of Business

Mailing Address

FILED Mar 03 1998 8:00am Secretary of State



| 11055 DANZI JACKSONVIL | | 11055 DANZIG WAY JACKSONVILLE FL 32257 | | | | DO NOT WRITE IN THIS SPACE | | | | |
|---|--|--|------------|--|--|---|------------------|--------------------------------|---------------|--|
| | | | | | | Date incorporated or Qualified 03/05/1996 | | | | |
| | ace of Business | 2a. Mailing Address | | | | 4. FEI Number | | | plied For | |
| | Old Kings Rd. N | 26 7305 Old Kings Rd. N | | | N | <u>59-3367588</u> | | | ol Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required | | |
| 201 | onville, FL | City & State 28 Jacksonville, FL Zip Country | | | | Election Campaign Financing Trust Fund Contribution Added to Fees | | | | |
| Zip 32219 | | ^{Zip} 32219 | itry SA | 8. This corporation owes or has pald the current year Intangib Personal Property Tax due June 30. Yes No | | | | 1 | | |
| | 9. Name and Address of Current | | 81 Name | | 10. Name and Address of New R | egistered | Agent | | | |
| SANTORO, THOMAS C | | | | |) | | | |] | |
| 1700 WELLS ROAD Suite 5 | | | | 82 Stree | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| ORANGE PARK FL 32073 | | | | 83 | | | | | | |
| | | | | 84 City | | | FL | 85 Zip | Code | |
| 11. Pursuant I | to the provisions of Sections 607.0502 | and 607.1508, Florida Statut | es, the ab | ove-name | d corpora | ation submits this statement for the | purpose c | of changing it | s 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 | | | | | | | | | | |
| | | | | Agent signatu | re required w | when reinstating) ADDITIONS/CHANGES TO OFFI | DATE CERS ANI | D DIRECTOR | 2S IN 12 | |
| 12. | PD OFFICERS AND | DELETE | 1.1 111 | F | PD | ADDITIONS/OFFARIGES TO CITT | OE/10 / 01 | X Change | Addition | |
| TITLE NAME | SIGLEY, GLENDA J. | CII occur | 1.2 NA | | | ley, Glenda J. | | | | |
| STREET ADDRESS | 11055 DANZIG WAY | | | reet address | | 1 First St. Nor | +h | | | |
| CITY-ST-ZIP | JACKSONMLLE FL | | | Y-ST-ZIP | | ksonville Beach | | 32250 | ı İ | |
| TITLE | STO | DELETE | 2.1 TIT | | STE | | | X Change | Addition | |
| NAME | SIGLEY, CLEBERN W | | 2.2 NA | ME | | ley, Clebern W | | | | |
| STREET ADDRESS | 11055 DANZIG WAY | | 2.3 ST | REET ADDRESS | 1 0 0 | 11 First St Nor | +h | | | |
| CITY-ST-ZIP | JACKSONVILLE FL 32257 | | 2.4 CI | TY - ST - ZIP | Jac | l First St. Nor ksonville Beach | FL | 32250 |) | |
| TITLE | | ☐ DELETE | 3.1 TIT | | | | -5 | Change | Addition | |
| NAME | | | 3.2 NA | ME | 1 | | | | | |
| STREET ADDRESS | | | . 3.3 ST | REET ADDRESS | . | | | | | |
| CITY-ST-ZIP | | | 3.4. CI | TY-ST-ZIP | ļ | | | | | |
| TITLE | | DELETE | 4.1 TIT | LE | | | | ☐ Change | Addition | |
| NAME | | | 4.2 N | ME | | | | | 1 | |
| STREET ADDRESS | | | 4.3 ST | REET ADDRESS | : | | | | 1 | |
| CITY-ST-2IP | | | 4.4 CI | Y-ST-ZIP | | | | | | |
| TITLE | | ☐ DELE TE | 5.1 TiT | LE | } | | | ☐ Change | Addition | |
| NAME | | | 5.2 NA | ME | 1 | | | | | |
| STREET ADDRESS | | | 5.3 ST | reet address | : [| | | | | |
| CITY - ST - ZIP | | | 5.4 Ci | Y-ST-ZIP | | | | | | |
| TITLE | | ☐ DELETE | 6.1 TIT | LE | | | | L Change | Addition | |
| NAME | | | 6.2 NA | ME | | | | | | |
| STREET ADDRESS | | | 6.3 ST | reet adoress | : [| | | | | |
| CITY-ST-ZIP | | | | Y-ST-ZIP | 1 | otion 119 07/3/(i) Florida Statutos | 1.7 - 36 | Talf. ab a tab a | 1-6 | |

I nereby 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 chapted, or on an attachment with an address.

2/20/20