FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P9600030003 (3) FANTASY RACING, INC.

FILED May 20 1997 8:00am Secretary of State



Principal Place of Business Mailing Address										
3616 CENTURY		3616 CENTURY BLVD.								
LAKELAND FL	33811	LAKELAND FL 33811-136	55							
							 Date Incorporated or Qualified 04/05/1996 	3a. Date of Le	ast Report	
	lace of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number		Applied For	
21 Suite Ant	# Ala	[26]						Not Applicable		
Sulte, Apt.	₩, GCC.	Suite, Apt. #, etc.	27				5. Certificate of Status Desired		75 Additional e Required	
City & State	e	City & State				Election Campaign Financing \$5.00 May Be				
23		28	28				Trust Fund Contribution		ded to Fees	
Zip	Country	Zip		intry			8. This corporation has liability for in		lor s. 199.032,	
24	25	29]	30	· ·		L		Yes No		
9. Name and Address of Current Registered Agent						ame	10. Name and Address of New Registered Agent			
· WENDEL, JOHN F · 5300 SOUTH FLORIDA AVENUE LAKELAND FL 33813										
					Street Addre		s (P.O. Box Number is Not Acceptable	o)		
				83						
				84	Cit	ity	,	85	Zıp Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Sta	lules, the a	J bove	i e-nar	med corpora	ation submits this statement for the pa	FL I	ng its registered	
office or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida, Such change wa ations of, Section 607,0505,	s authorize Florida Stal	d by Jules	the 3.	corporation	ation submits this statement for the pi 's board of directors. I hereby accep	the appointmen	it as registered	
SIGNATURE Signature, lynx dior printed name of registered agent and title if applicable (NOT). Registered Agent signature registed when re-estating). DATE OFFICE READ DATE CAPITATION OF THE C										
12.	OFFICERS AN	D DIRECTORS	13.	O Age	111 51131	analove required a	ADDITIONS/CHANGES TO OFFICE		TORS IN 12	
TITLE	President and D	droctor Decele	1.1 10	TLE				Cha	nge 🔲 Addition	
NAME	Marvin, Edward	rector ee		1.2 NAME						
STREET ADDRESS	510 Hampton Ave	•	1.3 \$1		3 STREET ADDRESS					
CITY-ST-ZIP	Lakeland, Fl. 3	3801			1-21P					
TITLE	Vice President	and Director	2.110					☐ Cha	nge 📙 Addition	
NAME	Rigdon, Emmett M.			2.2.NAME						
STREET ADDRESS	5060 Starling D	r.	2.3 STHEET ADDRESS 2.4 CITY+ST-ZIP							
CITY-ST-ZIP TITLE	Mulberry, Fl. 3	3860 DELETE	2. 4 C		51 - Zif	P		Cha	nge Addition	
NAME		F) DECE (1	3.1 N					L. One	ngo L. Hoution	
STREET ADDRESS					ADDR	RESS				
City-St-Zip					\$1-ZIP					
TITLE		DELETE	4.1.70				*** ****	Cha	nge 🔲 Addition	
NAME			4. 2 N	IMMI						
STREET ADDRESS			43 B	TREET	ADDR	RESS				
CITY-ST-ZIP			440	IIY-S	7- 7 P	·				
TITLE	"	☐ DELETE	51 TI	TLE				☐ Cha	nge 🔲 Addition	
NAME			5 2 N							
STREET ADDRESS			5.3 \$	TREET	ADDR	RESS			Ì	
CITY-ST-ZIP					1 - ZIP	·				
TITLE		[_] DELETE	6.1 10					Cha	nge L. Addition	
NAME			6.2 N						ļ	
STREET ADDRESS			1		ADDR	}			ļ	
City-St-ZiP	ou cartify that the information cumple	d with this filing doos not au		··· ·	3-7P		Section 119.07(3)(i) Florida Statutes	Liuribor codify	that the	

4. I do 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.

GNATURE. Edward L. Maryin Colonia & Men Levillo ou 448 4