## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 09, 2004 8:00 am Secretary of State **DOCUMENT # P97000068770** 04-09-2004 90053 011 \*\*\*158.75 WOODHAM RACING, INC. Principal Place of Business Mailing Address 331 S COMET AVE 331 S COMET AVE PANAMA CITY, FL 32404 PANAMA CITY, FL 32404 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03042004 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For 59-3465637 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Diane C. Hare, CPA HARE, DIANE C.C. Street Address (P.O. Box Number is Not Acceptable) 3003 S HWY 77, STE A LYNN HAVEN, FL. 32444 2589 Jenks Avenuc 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE ☐ Addition WOODHAM, ROBERT JEFFREY NAME NAME STREET ADDRESS STREET ADDRESS 331 S COMET AVENUE PANAMA CITY, FL 32404 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

<u>850-871-0130</u>