2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000080225

Entity Name: ROGGEN MOTORSPORTS, INC.

FILED Feb 19, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2840 SECURITY LN

LAKELAND, FL 33803 US

34 LAKE ARROWHEAD DRIVE
WINTER HAVEN, FL 33880 US

Current Mailing Address: New Mailing Address:

2840 SECURITY LANE

LAKELAND, FL 33803 US

34 LAKE ARROWHEAD DRIVE
WINTER HAVEN, FL 33880 US

FEI Number: 59-3469348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROGGEN, KEVIN R
2840 SECURITY LANE
LAKELAND, FL 33803 US
ROGGEN, KEVIN R
34 LAKE ARROWHEAD DRIVE
WINTER HAVEN, FL 33880 US

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.

SIGNATURE: 02/19/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ROGGEN, KEVIN R
 Name:
 ROGGEN, KEVIN R

 Address:
 2840 SECURITY LANE
 Address:
 34 LAKE ARROWHEAD DRIVE

City-St-Zip: LAKELAND, FL 33803 US

City-St-Zip: WINTER HAVEN, FL 33880 US

Title: VP () Delete Title: VP (X) Change () Addition Name: ROGGEN, KEVIN M Name: ROGGEN, KEVIN M

Address: 2840 SECURITY LANE Address: 2845 THORNHILL ROAD City-St-Zip: LAKELAND, FL 33803 US City-St-Zip: WINTER HAVEN, FL 33880 US

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change () Addition}$

 Name:
 ROGGEN, DEBRA C
 Name:
 ROGGEN, DEBRA C

 Address:
 2840 SECURITY LANE
 Address:
 34 LAKE ARROWHEAD DRIVE

Address: 2840 SECURITY LANE Address: 34 LAKE ARROWHEAD DRIVE City-St-Zip: LAKELAND, FL 33803 US City-St-Zip: WINTER HAVEN, FL 33880 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA C ROGGEN S 02/19/2008