2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P9900026466 , Feb 20, 2001 8:00 am Secretary of State Davis & Weight Motorsports, Inc. 02-20-2001 90043 001 ***150.00 Principal Place of Business: Mailing Address 2380 Jamestown Road 2380 Jamestown Road Fernandina Beach, Fl Fernandina Beach, Fl 32034 32034 ace of Business 2. Princip« 3. Mailing Address St. Johns Bluff Road 855-601 St. Johns Bluff Road DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State Not Applicable Jacksonville, Florida Jacksonville, Florida 59-3562940 Zip Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required US ---32225 **~ 32225** ~~ ~ US- ~--7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Davis, Jerry W. Street Address (P.O. Box Number is Not Acceptable) 2380 Jamestown Road Fernandina Beach, Florida 855-601 St. Johns Bluff Road Zip Code se of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity submits this statement for the p SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typ FILE NOW![| FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. XIX Change Addition TITLE TITLE Delete D NAME Davis, Jerry W. NAME Davis, Jerry W. STREET ADDRESS STREET ADDRESS. 855-601 St. Johns Bluff Road 2380 Jamestown Road CITY-ST-ZIP CITY-ST-ZIP Jacksonville, FL 32225 Fernandina Beach, Florida 32034 X Change ☐ Addition Delete TITLE TITLE NAME Weight, Anthony V. NAME Weight Anthony V. Bluff Road STREET ADDRESS STREET ADDRESS 2380 Jamestown Road CITY-ST-ZIP Jacksonville, Fl CITY-ST-ZIP ... Fernandina Beach F1-32034 Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE 7+7LE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if like empowered.

SIGNATURE: