2000 UNIFORM BUSINESS REPORT (UBR)

Apr 22, 2000 8:00 am Secretary of State DOCUMENT # **P99000033085** CEDAR KEY RACEWAY, INC. 04-22-2000 90069 028 ***150.00 Principal Place of Business Mailing Address 12810 JERNIGAN AVE. P.O. BOX 96 TRENTON FL 32693-0096 CEDAR KEY FL 32625 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State Not Applicable 59-3570516 Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CAUSEY, KATHRYN F Street Address (P.O. Box Number is Not Acceptable) 413 N.E. 7TH ST. TRENTON FL 32693 Zip Code 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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. П Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ★ Addition P/S/D TITLE Change TITLE ☐ Delete NAME JAMES B. HOY NAME 12810 JERNIGAN AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CEDAR KEY FL 32625 Addition ☐ Delete Change TITLE VITIO TITLE MARJORIE A. HOY NAME NAME 12810 JERNIGAN AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP CEDAR KEY FL 32625 Addition Change TITLE ☐ Delete TITLE KATHRYN F. CAUSEY CPA NAME NAME 413 N.E. 7th Street STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TRENTON FL 32693 CITY-ST-ZIP **⊠** Addition ☐ Change TITLE ☐ Delete TITLE BENZAMIN T. HOY NAME NAME STREET ADDRESS 12810 JERNIGAN AVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP CEDAR KEY, FL 32003 32625 Addition ☐ Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME

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 changed, or on an attachment with an address, with all ether the empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/200

352/463-0502 CA

Daytime Phone #