


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 31, 2003 8:00 am**  
**Secretary of State**

01-31-2003 90144 011 \*\*\*150.00

**DOCUMENT # P99000068437**

1. Entity Name  
**MOTORSPORTS BROADCASTING, INC.**



Principal Place of Business  
**1801 W INTERNATIONAL SPEEDWAY BLVD  
DAYTONA BEACH FL 32114-1243**

Mailing Address  
**1801 W INTERNATIONAL SPEEDWAY BLVD  
DAYTONA BEACH FL 32114-1243**

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip

4. FEI Number **59-3595791**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**CROTTY, W. GARRETT**  
**1801 W INTERNATIONAL SPEEDWAY BLVD**  
**DAYTONA BEACH FL 32114**

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>FRANCE, BRIAN Z</b> <b>1801 W INTERNATIONAL SPEEDWAY BLVD</b> <b>DAYTONA BEACH FL 32114</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DV</b> <b>KENNEDY, LESA D</b> <b>1801 W INTERNATIONAL SPEEDWAY BLVD</b> <b>DAYTONA BEACH FL 32114</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>FRANCE, JAMES C</b> <b>1801 W INTERNATIONAL SPEEDWAY BLVD</b> <b>DAYTONA BEACH FL 32114</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>BROOKS, PAUL</b> <b>2049 CENTURY PARK EAST</b> <b>LOS ANGELES CA 90067</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TCFO</b> <b>WILSON, TODD</b> <b>1801 W INTERNATIONAL SPEEDWAY BLVD</b> <b>DAYTONA BEACH FL 32114</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>FRANCE, JENNIFER A</b> <b>1801 W INTERNATIONAL SPEEDWAY BLVD</b> <b>DAYTONA BEACH FL 32114</b> <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

**SIGNATURE:** *SIGNATURE REQUIRED* James C. France, Director 1/17/2003.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)