

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State

02-19-2002 90026 018 ***150.00

DOCUMENT # P99000092874

1. Entity Name
PERFORMANCE MOTORSPORTS, INC.

Principal Place of Business

1333 PINE AVE
STE B
ORLANDO FL 32824

Mailing Address

PO BOX 2264
ORLANDO FL 32824



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

16123 W. Colonial Dr.
 Suite, Apt. #, etc.

3. Mailing Address

16123 W. Colonial Dr.
 Suite, Apt. #, etc.

City & State

Winter Garden, FL

City & State

Winter Garden, FL

4. FEI Number

59-3604616

Applied For

Not Applicable

Zip
34787

Country
USA

Zip
34787

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KERN, WYNDELL T
17501 DEER ISLE CIRCLE
HOWEY IN THE HILLS FL 34737

7. Name and Address of New Registered Agent

Name
KERN, Wyndell T.
Street Address (P.O. Box Number is Not Acceptable)
17501 Deer Isle Cir.
City
Winter Garden **FL** **Zip Code**
34787

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.

SIGNATURE *[Signature]*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE
 1/18/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
D ☐ Delete
NAME
KERN, WYNDELL T
STREET ADDRESS
3220 ALAMO DRIVE
CITY-ST-ZIP
ORLANDO FL 32805

TITLE
D ☐ Delete
NAME
KERN, RALPH P
STREET ADDRESS
3112 ALAMO DRIVE
CITY-ST-ZIP
ORLANDO FL 32805

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
President ☒ Change ☐ Addition
NAME
KERN, Wyndell T.
STREET ADDRESS
17501 Deer Isle Cir.
CITY-ST-ZIP
Winter Garden, FL

TITLE
V.P. ☒ Change ☐ Addition
NAME
KERN, Ralph P.
STREET ADDRESS
P.O. Box 2264
CITY-ST-ZIP
Orlando, FL 32802

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)