

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 26, 2002 8:00 am**  
**Secretary of State**

08-26-2002 90055 032 \*\*\*150.00

**DOCUMENT # P99000104119**

1. Entity Name  
**ROBERTS RACING, INC.**

Principal Place of Business  
**14920 EVANS RANCH ROAD  
 LAKELAND FL 33809**

Mailing Address  
**14920 EVANS RANCH ROAD  
 LAKELAND FL 33809**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **31-1679164**

Applied For  
 Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROBERTS, G THOMAS  
 14920 EVANS RANCH ROAD  
 LAKELAND FL 33809**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>ROBERTS, G THOMAS</b>	
STREET ADDRESS	<b>14920 EVANS RANCH ROAD</b>	
CITY-ST-ZIP	<b>LAKELAND FL 33809</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(l), 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: *G Thomas Roberts*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E034 (4/02)

Attachment

926518

8-9-02

**To: Division of Corporations  
Uniform Business Report Filing  
P.O. Box 1500  
Tallahassee, FL 32302 - 1500**

**From: Roberts Racing, Inc.  
Roberts, G. Thomas  
14920 Evans Ranch Rd.  
Lakeland, FL 33809**

**This is the first notice of the UBR report that I have received. Please accept my filing fee of \$150.00 to fulfill my obligation in full. Thank you for your help in resolving this matter.**

**Respectfully,**

**G. Thomas Roberts  
Document #P9900104119  
FEI #31-1679164**