## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # S93271

Principal Place of Business

COLLIER SPORTS PARK SPEEDWAY, INC.

4273 ENTERPRIS	SE AVE	4273 ENTERPRISE AVE							
#4 Naples FL 3411	04	NAPLES FL 34104				DO NOT V	VRITE IN TH	IS SPACE	
US		US			3. Date Incorporated or Qualifed 11/07/1991				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number			pplied For
21		26				65-0297194	<u>.*</u>		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<b>~</b>			5. Certificate of Status Desired	<b>.</b> .	•	Additional equired
City & State City & State						6. Election Campaign Financi	ng _	\$5.00	May Be
23						Trust Fund Contribution	a 🗆	•	to Fees
Zip	Country Zip			Country		8. This corporation owes the	current year	Intangible	
24	25 29 30					Personal Property Tax. Yes No			
Name and Address of Current Registered Agent						10. Name and Address of Ne	w Registere	d Agent	
	- ,			81 Na	ime				İ
ANG	LIN, JAMES R		82 Street Ac		root Addro	ess (P.O. Box Number is Not Acc	entable)	<del></del>	
4911	- 12TH AVE., SW		82 Street Add			ess (F.O. Box Number is Not Acc	spiable)		
NAPI	LES FL 33999		İ	83					
			Ĺ					OF Zin	
				84 Cit	ty		F	L 85 Zip	Code
44 Dumunt	to the provisions of Sections 607.05	02 and 607 1508 Florida Statutes	the ab	ove-nar	ned corpo	oration submits this statement for	the purpose	of changing its	registered
office or r	egistered agent or both in the State	of Florida, Such change was aut	norizea	ov me o	corporation	n's board of directors. I hereby ac	cept the app	ointment as re	gistered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Florid	ia Statu	tes.					į
SIGNATURE	Signature, typed or printed name of registered ag	oot and title if applicable (NOTE: R	Perioterari	Anont signs	ature required	t when reinstating)	DATE		<del></del>
12.		ND DIRECTORS	13.	ngork digin		ADDITIONS/CHANGES TO	OFFICERS	AND DIRECTO	ORS IN 12
TITLE	P	☐ DELETE	1.1 TIT	Æ	T			☐ Change	☐ Addition
. 1	ANGLIN, JIM		1.2 NA						
NAME	4911 12TH AVE. SW			REET ADOF	550				
STREET ADDRESS	•								
CITY-ST-ZIP	NAPLES FL	☐ DELETE	2.1 TIT	Y-ST-ZIP	<del></del> -		<del></del>	Change	Addition
TITLE	S ANCUM CUCAN		2.2 NA						_
NAME	ANGLIN, SUSAN				DE00		=	-	ţ
STREET ADDRESS	4911 12TH AVE. SW			REET ADDI	i				
CITY-ST-ZIP	NAPLES FL	DELETE	-	Y-ST-ZIP	<del>'                                     </del>	·	:	Change	Addition
TITLE	V	. DELETE	3.1 TIT		}			g-	J
NAME	UILRICH, CARL		3.2 NA						
STREET ADDRESS	2761 TERACE AVE			REET ADDI					į
CITY-ST-ZIP	NAPLES FL:	C acter		Y-ST-ZIP				Change	Addition
TITLE	Pro-	☐ DELETE	4.1 TIT						, adduoit
NAME			4. 2 NA						
STREET ADDRESS			4.3 STI	REET ADD	RESS				
CITY-ST-ZIP				Y-ST-ZIP				Change	Addition
TITLE		☐ DELETE	5.1 TIT		[	·		[_] change	L Addition )
NAME			5.2 NA		1	•			1
STREET ADDRESS				REET ADD	RESS				\
CITY-ST-ZIP				Y-ST-ZIP					
TITLE		☐ DELETE	6.1 TIT					Change	Addition
NAME			6.2 NA						
STREET ADDRESS	}		6.3 ST	REET ADD	RESS	•			
CITY-ST-ZIP		<u> </u>		Y-ST-ZIP					
14. I hereby	certify that the information supplied v	with this filing does not qualify for t	the exer	nption s	stated in S	Section 119.07(3)(i), Florida Statu	es. I further	certify that the	information

and accurate and that my signature shall have the same legal effected to execute this report as required by Chapter 607. Florida indicated on this annual report of officer or director of the corporati Block 12 or Block 13 if changed. **SIGNATURE** 

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90116 012 \*\*\*150.00