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Sep 15, 1999 8:00 am  
Secretary of State

09-15-1999 90013 013 \*\*\*550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V13844

1. Corporation Name

OCALA MOTOR SPORTS, INC.

Principal Place of Business

3920 N HWY 41  
OCALA FL 34475  
US

Mailing Address

107 NE 1ST AVE  
OCALA FL 34470  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/12/1992

2. Principal Place of Business

21 3920 N US HWY 441  
Suite, Apt. #, etc.

2a. Mailing Address

26 3920 N US HWY 441  
Suite, Apt. #, etc.

4. FEI Number

59-3112468

Applied For

Not Applicable

22 City & State

23 Ocala FL

27 City & State

28 Ocala FL

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

\$5.00 May Be  
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible

Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

NEWTON, ELBERT H  
550 N.E. 25TH AVE  
OCALA FL 34470

10. Name and Address of New Registered Agent

81 Name

ROBERT C. ALLEN

82 Street Address (P.O. Box Number is Not Acceptable)

3920 N US HWY 441

83

84 City

OCALA

FL

85 Zip Code

34475

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ROBERT C. ALLEN B/A SECRETARY

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9.1.99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME LEWIS, JEFF  
STREET ADDRESS 1524 SOUTHEAST 22 AVE.  
CITY-ST-ZIP Ocala FL

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

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☐ Change ☒ Addition

1.2 NAME KENNETH H MEAD  
1.3 STREET ADDRESS 1641 CUTTY SARR RD  
1.4 CITY-ST-ZIP VIRGINIA BEACH VA 23454

2.1 TITLE SECRETARY ☐ Change ☒ Addition

2.2 NAME ROBERT C. ALLEN  
2.3 STREET ADDRESS 3920 N US HWY 441  
2.4 CITY-ST-ZIP Ocala FL 34475

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual report is true and accurate and that the officer or director of the corporation

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CR2E034 (11/98)