


**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

6/17

FILED
Jul 30, 2003 8:00 am
Secretary of State

07-30-2003 90067 047 ***400.00
06-17-2003 90025 003 ***150.00

DOCUMENT # V55408			
1. Entity Name GATOR TRACK, INC.			
Principal Place of Business 10333 FRONT BEACH ROAD PANAMA CITY BEACH FL 32407		Mailing Address 10333 FRONT BEACH ROAD PANAMA CITY BEACH FL 32407	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Country	
Zip		Country	
4. FEI Number 59-3118536		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
Name FIORAMONTI, DEBORAH A.		Name	
Street Address (P.O. Box Number is Not Acceptable) 10333 FRONT BEACH ROAD		Street Address (P.O. Box Number is Not Acceptable)	
City PANAMA CITY BEACH FL 32407		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rehashing)</small> 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. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD	NAME FIORAMONTI, DEBORAH A.	<input type="checkbox"/> Delete	TITLE
STREET ADDRESS 10333 FRONT BEACH ROAD	CITY-ST-ZIP PANAMA CITY BEACH FL 32407		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE STV	NAME FIORAMONTI, DANIEL R.	<input type="checkbox"/> Delete	TITLE
STREET ADDRESS 10333 FRONT BEACH ROAD	CITY-ST-ZIP PANAMA CITY BEACH FL 32407		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	NAME FIORAMONTI, DANIEL R.	<input type="checkbox"/> Delete	TITLE
STREET ADDRESS 10333 FRONT BEACH ROAD	CITY-ST-ZIP PANAMA CITY BEACH FL 32407		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	<input type="checkbox"/> Delete	TITLE
STREET ADDRESS	CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	<input type="checkbox"/> Delete	TITLE
STREET ADDRESS	CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	<input type="checkbox"/> Delete	TITLE
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: <u><i>Deborah A. Fioramonti</i></u>		DATE _____ Daytime Phone # _____	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			

CR2E034 (10/02)