2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000108321

Entity Name: MOTOR RACING NETWORK, INC.

Current Principal Place of Business:

555 MRN DRIVE CONCORD, NC 28027

Current Mailing Address:

C/O SUZANNE THOMPSON ONE DAYTONA BOULEVARD DAYTONA BEACH, FL 32114

FEI Number: 59-3613374 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHARBACK, BRETT M ONE DAYTONA BOULEVARD DAYTONA BEACH, FL 32114 US

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:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

Name KENNEDY, LESA D Name WOLFE, DARYL Q

Address ONE DAYTONA BOULEVARD

City-State-Zip: DAYTONA BEACH FL 32114

Address ONE DAYTONA BOULEVARD

City-State-Zip: DAYTONA BEACH FL 32114

 Title
 DIRECTOR
 Title
 PRESIDENT

 Name
 SAUNDERS, JOHN R
 Name
 HYATT, DAVID C

 Address
 ONE DAYTONA BOULEVRD
 Address
 555 MRN DRIVE

City-State-Zip: DAYTONA BEACH FL 32114 City-State-Zip: CONCORD NC 28027

Title TREASURER Title SECRETARY

Name HOUSER, DANIEL W Name CROTTY, W. GARRETT

Address ONE DAYTONA BOULEVARD Address ONE DAYTONA BOULEVARD

City-State-Zip: DAYTONA BEACH FL 32114 City-State-Zip: DAYTONA BEACH FL 32114

Title ASST. SECRETARY
Name SCHARBACK, BRETT M

Address ONE DAYTONA BOULEVARD
City-State-Zip: DAYTONA BEACH FL 32114

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: BRETT M. SCHARBACK ASSISTANT SECRETARY

Electronic Signature of Signing Officer/Director Detail

02/02/2015 Date

FILED Feb 02, 2015

Secretary of State

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