


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # F0000005901	
1. Entity Name THE JOCKEY CLUB RACING SERVICES, INC.	

Principal Place of Business 821 CORPORATE DRIVE LEXINGTON, KY 40503	Mailing Address 40 EAST 52ND STREET NEW YORK, NY 10022
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DO NOT WRITE IN THIS SPACE



04222008 No Chg-P CR2E034 (11/05)

4. FEI Number 13-3561964	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

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

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)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000833398 05/22/08-80085-016 150.00
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-10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V O'CONNELL, DANIEL P 40 EAST 52ND STREET NEW YORK, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BARILLARO, LAURA 40 EAST 52ND STREET NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MARZELLI, ALAN 40 E. 52ND. ST. NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PHIPPS, OGDEN MILLS 40 EAST 52ND STREET NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZEITLIN, HENRY A 821 CORPORATE DRIVE LEXINGTON, KY 40503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GAGLIANO, JAMES 40 EAST 52ND ST NEW YORK, NY 10022

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Daniel P O'Connell* **4/22/08** **(212)371-5970**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #