


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 02, 2007 8:00 am**  
**Secretary of State**

05-02-2007 90082 028 \*\*\*150.00

DOCUMENT # P05000105598			
1. Entity Name THE RACING NETWORK, INC.			
Principal Place of Business 24761 US HWY 19 N SUITE 630 CLEARWATER, FL 33763 US		Mailing Address 24761 US HWY 19 N SUITE 630 CLEARWATER, FL 33763 US	
2. Principal Place of Business - No P.O. Box # <i>2430 Estancia Blvd.</i>		3. Mailing Address <i>2430 Estancia Blvd</i>	
Suite, Apt. #, etc. <i>Suite 108</i>		Suite, Apt. #, etc. <i>Suite 108</i>	
City & State <i>Clearwater, FL</i>		City & State <i>Clearwater, FL</i>	
Zip <i>33761</i> Country <i>US</i>		Zip <i>33761</i> Country <i>US</i>	
4. FEI Number 20-3229956		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  SCOURTAS, LOUIS C 24761 US HWY 19 N SUITE 630 CLEARWATER, FL 33763		7. Name and Address of New Registered Agent Name <i>Scourtas, Louis C.</i> Street Address (P.O. Box Number is Not Acceptable) <i>2430 Estancia Blvd.</i> <i>Suite 108</i> City <i>Clearwater</i> FL Zip Code <i>33761</i>	
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: <i>[Signature]</i>		LOUIS C. SCOURTAS <i>4/25/07</i>	
Signature typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reconstituting)	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<i>P</i> <input type="checkbox"/> Delete	TITLE	<i>P</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THREE SIXTY HOLDINGS LLC	NAME	Three Sixty Holdings LLC
STREET ADDRESS	24761 US HWY 19 NORTH SUITE 630	STREET ADDRESS	2430 Estancia Blvd Suite 108
CITY - ST - ZIP	CLEARWATER, FL 33763	CITY - ST - ZIP	Clearwater, FL 33761
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
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: <i>[Signature]</i>		Date <i>4/27/07</i>	
Signature and typed or printed name of signing officer or director		Date	