


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90275 028 ***150.00


DOCUMENT # P14841
 1. Entity Name
RACETRAC PETROLEUM, INC.



Principal Place of Business Mailing Address
300 TECHNOLOGY COURT **300 TECHNOLOGY COURT**
SMYRNA, GA 30082-5232 **SMYRNA, GA 30082-5232**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country



04222004 Chg-P CR2E034 (10/03)

4. FEI Number Applied For
63-0642959 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent **7. Name and Address of New Registered Agent**

CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324

Name
 Street Address (P.O. Box Number is Not Acceptable)
 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 _____ 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, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PASD LENKER, MAX V. <input type="checkbox"/> Delete 300 TECHNOLOGY COURT SMYRNA, GA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOLCH, SUSAN BASS <input type="checkbox"/> Delete 300 TECHNOLOGY COURT SMYRNA, GA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCFO DUMBACHER, BOB <input type="checkbox"/> Delete 300 TECHNOLOGY COURT SMYRNA, GA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CECS BOLCH, CARL, JR. <input type="checkbox"/> Delete 300 TECHNOLOGY COURT SMYRNA, GA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CASC BOLCH, CARL, JR. 300 TECHNOLOGY COURT SMYRNA, GA 30082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VLGC BOCH, CARL 111 <input checked="" type="checkbox"/> Delete 300 TECHNOLOGY CT SMYRNA, GA 30082	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VPAS CZAJA, CLAUDE P 300 TECHNOLOGY COURT SMYRNA, GA 30082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORAN, ALLISON BOLCH <input type="checkbox"/> Delete 300 TECHNOLOGY CT SMYRNA, GA	TITLE NAME 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: Robert J. Dumbacher 4-26-04 (770) 431-7600 x.1188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ROBERT J. DUMBACHER