2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # P14841** May 01, 2000 8:00 am Secretary of State RACETRAC PETROLEUM, INC. 05-01-2000 90014 045 ***150.00 Principal Place of Business Mailing Address 300 TECHNOLOGY COURT 300 TECHNOLOGY COURT SMYRNA GA 30082-5235 SMYRNA GA 30082-5232 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 63-0642959 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD **PLANTATION FL 33324** Zip Code City FL 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Change Addition PASD ☐ Defete TITLE TITLE NAME LENKER, MAX V. NAME STREET ADDRESS STREET ADDRESS 300 TECHNOLOGY COURT CITY-ST-7IP CITY-ST-ZIP SMYRNA GA Addition ☐ Change ☐ Delete TITLE NAME **BOLCH, SUSAN BASS** NAME STREET ADDRESS 300 TECHNOLOGY COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SMYRNA GA Change ~ □ Delete TITLE CFO/AS Addition TITLE DUMBACHER, BOB NAME NAME STREET ADDRESS 300 TECHNOLOGY COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SMYRNA GA ☐ Change ☐ Addition **CECS** ☐ Delete TITLE BOLCH, CARL, JR. NAME NAME STREET ADDRESS STREET ADDRESS 300 TECHNOLOGY COURT CITY-ST-ZIP CITY-ST-ZIP SMYRNA GAT ☐ Change Addition ☐ Delete TITLE TITLE NAME BOCH, CARL 111 NAME STREET ADDRESS STREET ADDRESS 300 TECHNOLOGY CT CITY-ST-ZIP CITY-ST-7IP SMYRNA GA ☐ Change Addition ☐ Delete TITLE TITLE **BOLCH MORAN, ALLISON** NAME STREET ADDRESS STREET ADDRESS 300 TECHNOLOGY CT CITY-ST-ZIP CITY-ST-ZIP SMYRNA GA 13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date