

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 326354

FILED
Apr 20, 2007
Secretary of State

Entity Name: DEALER RISK SERVICES, INC.

Current Principal Place of Business:

1101 NORTH CONGRESS AVE. SUITE 201
BOYNTON BEACH, FL 33426 US

New Principal Place of Business:

Current Mailing Address:

1101 NORTH CONGRESS AVE. SUITE 201
BOYNTON BEACH, FL 33426 US

New Mailing Address:

FEI Number: 59-1206698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBSON, STEVEN P
304 PALM COURT
INDIALANTIC, FL 32903 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GIBSON, STEVEN P
Address: 304 PALM COURT
City-St-Zip: INDIALANTIC, FL 32903 US

Title: VP () Delete
Name: SOUSA, LORI J
Address: 6933 BLUE SKIES DR
City-St-Zip: LAKE WORTH, FL 33463 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SOUSA, LORI J
Address: 4320 POMELO BOULEVARD
City-St-Zip: BOYNTON BEACH, FL 33436 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LORI J SOUSA

VP

04/20/2007

Electronic Signature of Signing Officer or Director

Date