

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005655

FILED
Jan 03, 2012
Secretary of State

Entity Name: AUTOBYTEL INC.

Current Principal Place of Business:

18872 MACARTHUR BOULEVARD
SUITE 200
IRVINE, CA 92612 US

New Principal Place of Business:

Current Mailing Address:

18872 MACARTHUR BOULEVARD
SUITE 200
IRVINE, CA 92612 US

New Mailing Address:

FEI Number: 33-0711569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: DCEO
Name: COATS, JEFFREY H
Address: 18872 MACARTHUR BLVD., SUITE 200
City-St-Zip: IRVINE, CA 92612 US

Title: C
Name: FUCHS, MICHAEL J
Address: 800 THIRD AVENUE, STE. 3700
City-St-Zip: NEW YORK, NY 10022 US

Title: D
Name: KAPLAN, MARK N
Address: FOUR TIMES SQUARE, 45TH FLOOR
City-St-Zip: NEW YORK, NY 10036 US

Title: D
Name: STIBEL, JEFFREY M
Address: 22761 PACIFIC COAST HWY.
City-St-Zip: MALIBU, CA 90265 US

Title: EVPS
Name: FULLER, GLENN E
Address: 18872 MACARTHUR BLVD., SUITE 200
City-St-Zip: IRVINE, CA 92612 US

Title: CFO
Name: DEWALT, CURTIS E
Address: 18872 MACARTHUR BLVD., SUITE 200
City-St-Zip: IRVINE, CA 92612 US

I hereby 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 all other like empowered.

SIGNATURE: GLENN E. FULLER

EVP

01/03/2012

Electronic Signature of Signing Officer or Director

_____ Date