

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 20, 2006
Secretary of State

DOCUMENT# N26320

Entity Name: VINTAGE VEHICLES OF FLORIDA, INC.**Current Principal Place of Business:**3807 PARA PET DR
COCOA, FL 32926 US**New Principal Place of Business:**1280 N. CARPENTER RD.
TITUSVILLE,, FL 32796 US**Current Mailing Address:**P. O. BOX 952
TITUSVILLE, FL 32781 US**New Mailing Address:****FEI Number:** 59-2938208**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMART, DAVID A
3807 POMPA DR
COCOA, FL 32926 US**Name and Address of New Registered Agent:**SMART, DAVID A
1280 N. CARPENTER RD.
TITUSVILLE, FL 32796 US

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: _____

08/20/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STAGGS, TOM
Address: 3620 CANAVARNL GROVES BLVD
City-St-Zip: COCOA, FL 32926

Title: VD () Delete
Name: MESSEMER, JACK
Address: 6436 DANE AVE
City-St-Zip: COCOA, FL 32927

Title: SD () Delete
Name: NOVICK, JOHN
Address: 4816 ARCHER CT
City-St-Zip: TITUSVILLE, FL 32796

Title: TD () Delete
Name: DYAL, HERBERT
Address: 3807 PARAPPEL DR
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: SYMON, MICHAEL
Address: 1590 THOMAS ST
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: SMART, DAVID
Address: 1280 NORTH CARPENTER
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MESSEMER, JACK
Address: 6436 DANE AVE.
City-St-Zip: COCOA, FL 32927

Title: VD (X) Change () Addition
Name: FITZPATRICK, ED
Address: 3330 GRANTLINE RD.
City-St-Zip: MIMS, FL 32754

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

Title: TD (X) Change () Addition
Name: ARNOLD, CRYSTAL
Address: 4290 PONDAPPLE DR.
City-St-Zip: TITUSVILLE, FL 32796

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRYSTAL P. ARNOLD

TD

08/20/2006

Electronic Signature of Signing Officer or Director

Date