

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000073482

FILED  
Jan 11, 2008  
Secretary of State

Entity Name: DISABLED DEALER ENTERPRISES INC.

**Current Principal Place of Business:**

426 ISLAND CAY WY  
APOLLO BEACH, FL 33572 US

**New Principal Place of Business:**

**Current Mailing Address:**

426 ISLAND CAY WY  
APOLLO BEACH, FL 33572 US

**New Mailing Address:**

FEI Number: 59-3400019      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMITH, STELLA  
426 ISALND CAY WY  
APOLLO BEACH, FL 33572 US

**Name and Address of New Registered Agent:**

SMITH, STELLA M VP  
426 ISALND CAY WY  
APOLLO BEACH, FL 33572 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: STELLA M. SMITH      01/11/2008  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: O'RIORDAN, OLIVER  
Address: 769 KINGSTON CT  
City-St-Zip: APOLLO BEACH, FL 33572

Title: ST ( ) Delete  
Name: SMITH, ROBERT  
Address: 426 ISLAND CAY WY  
City-St-Zip: APOLLO BEACH, FL 33572

Title: EPV ( ) Delete  
Name: SMITH, STELLA  
Address: 426 ISLAND CAY WY  
City-St-Zip: APOLLO BEACH, FL 33572

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: O'RIORDAN, OLIVER J  
Address: 769 KINGSTON CT  
City-St-Zip: APOLLO BEACH, FL 33572

Title: ST (X) Change ( ) Addition  
Name: SMITH, ROBERT J  
Address: 426 ISLAND CAY WY  
City-St-Zip: APOLLO BEACH, FL 33572

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

I hereby certify that the information supplied with this filing does not qualify 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: STELLA M. SMITH      VP      01/11/2008  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date