

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000001000

**Entity Name:** CHARITY CARS, INC.**Current Principal Place of Business:**407 WEKIVA SPRINGS ROAD  
SUITE 201  
LONGWOOD, FL 32779**Current Mailing Address:**407 WEKIVA SPRINGS ROAD  
SUITE 201  
LONGWOOD, FL 32779 US**FEI Number:** 59-3362703**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MENZIES, BRIAN  
407 WEKIVA SPRINGS ROAD  
SUITE 201  
LONGWOOD, FL 32779 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PCD  
Name MENZIES, BRIAN  
Address 407 WEKIVA SPRINGS ROAD  
SUITE 201  
City-State-Zip: LONGWOOD FL 32779

Title D  
Name WILLOUGHBY, TOM M  
Address 407 WEKIVA SPRINGS ROAD  
SUITE 201  
City-State-Zip: LONGWOOD FL 32779

Title D  
Name DASARO, BARBARA  
Address 407 WEKIVA SPRINGS ROAD  
SUITE 201  
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR  
Name FRANCIS, GEORGENE  
Address 407 WEKIVA SPRINGS ROAD  
SUITE 201  
City-State-Zip: LONGWOOD FL 32779

Title D  
Name FARMER, STERLING A  
Address 407 WEKIVA SPRINGS ROAD  
SUITE 201  
City-State-Zip: LONGWOOD FL 32779

Title D  
Name DASARO, GEORGE  
Address 407 WEKIVA SPRINGS ROAD  
SUITE 201  
City-State-Zip: LONGWOOD FL 32779

Title D  
Name ROE, PHILLIPPE  
Address 407 WEKIVA SPRINGS ROAD  
SUITE 201  
City-State-Zip: LONGWOOD FL 32779

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

**SIGNATURE:** BRIAN MENZIES**PRESIDENT****01/20/2014**

Electronic Signature of Signing Officer/Director Detail

Date