2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008
Secretary of State

DOCUMENT# 145530

Entity Name: NORTH FLORIDA MOTOR COMPANY

Current Principal Place of Business:

4620 SOUTHSIDE BLVD.
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

4620 SOUTHSIDE BLVD.
JACKSONVILLE, FL 32216

New Mailing Address:

2165 RIVER BLVD.
JACKSONVILLE, FL 32204

FEI Number: 59-0542573 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LYNCH,HAL
2165 RIVER BLVD
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

LYNCH MANAGEMENT COMPANY
2165 RIVER BLVD
JACKSONVILLE, FL 32204 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: ROBERT P. LYNCH 03/10/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LYNCH, WILLIAM B
Address: 9938 CHELSEA LAKE RD
City-St-Zip: JACKSONVILLE, FL 32256

Title: S ( ) Delete
Name: LYNCH, LARRY
Address: 2165 RIVER BLVD
City-St-Zip: JACKSONVILLE, FL

Title: VP ( ) Delete
Name: LYNCH, THOMAS
Address: 4372 ROMA BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: T ( ) Delete
Name: LYNCH, ROBERT
Address: 4704 ALGONQUIN AVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: AS ( ) Delete
Name: LE BARON, JUDY H
Address: 4620 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LYNCH, WILLIAM B
Address: 2165 RIVER BLVD.
City-St-Zip: JACKSONVILLE, FL 32204

Title: S (X) Change ( ) Addition
Name: LYNCH, LARRY P
Address: 2165 RIVER BLVD
City-St-Zip: JACKSONVILLE, FL 32204

Title: VP (X) Change ( ) Addition
Name: LYNCH, THOMAS P
Address: 2165 RIVER BLVD.
City-St-Zip: JACKSONVILLE, FL 32204

Title: T (X) Change ( ) Addition
Name: LYNCH, ROBERT P
Address: 2165 RIVER BLVD.
City-St-Zip: JACKSONVILLE, FL 32204

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: ROBERT P. LYNCH T 03/10/2008
Electronic Signature of Signing Officer or Director Date