

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED  
Feb 04, 2008  
Secretary of State

DOCUMENT# 461547

Entity Name: RALLYE MOTORS, INC.

**Current Principal Place of Business:**

1749 SW COLLEGE ROAD  
OCALA, FL 34474 US

**New Principal Place of Business:**

1749 SW COLLEGE ROAD  
OCALA, FL 34471 US

**Current Mailing Address:**

1749 SW COLLEGE ROAD  
OCALA, FL 34474 US

**New Mailing Address:**

1749 SW COLLEGE ROAD  
OCALA, FL 34471 US

FEI Number: 59-1553732

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ELLER, KEVIN  
1749 SW COLLEGE RD.  
OCALA, FL 34474 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: V ( ) Delete  
Name: ELLER, KEVIN  
Address: 1749 SOUTHWEST COLLEGE ROAD  
City-St-Zip: Ocala, FL 34474

Title: VSD ( ) Delete  
Name: BOSTIC, WANDA  
Address: 3000 N. MAIN ST.  
City-St-Zip: GAINESVILLE, FL 32609

Title: V ( ) Delete  
Name: SMITH, CHARLES  
Address: 1749 SW COLLEGE ROAD  
City-St-Zip: Ocala, FL 34474

Title: VD ( ) Delete  
Name: SMITH, CHRIS  
Address: 1749 SW COLLEGE ROAD  
City-St-Zip: Ocala, FL 34474

Title: D ( ) Delete  
Name: SULLIVAN, BARBARA  
Address: 481 MAIN STREET  
City-St-Zip: WILBRAHAM, MA 01095

Title: PD ( ) Delete  
Name: SULLIVAN, ART  
Address: 1000 INDIAN RD.  
City-St-Zip: PALM BEACH, FL 33480

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

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

Title: SD (X) Change ( ) Addition  
Name: GOGUEN, CYNTHIA  
Address: 4000 SW COLLEGE RD  
City-St-Zip: Ocala, FL 34474 US

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

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

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

Title: PD (X) Change ( ) Addition  
Name: SULLIVAN, ART  
Address: 4000 SW COLLEGE RD  
City-St-Zip: Ocala, FL 34474

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: KEVIN ELLER

V

02/04/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date