## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 473410** 

Entity Name: REGENCY AUTOHAUS, INC.

FILED Apr 25, 2006 Secretary of State

Current Pr	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:	
501 AIRPO NAPLES, F	PRT ROAD, S FL 34104	OUTH JS			
Current Mailing Address:			New Maili	New Mailing Address:	
501 AIRPORT ROAD, SOUTH NAPLES, FL 34104 US					
FEI Number: 59-1580966 FEI Number Applied For ( ) FEI Nu		FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
LIEBIG, WO 501 AIRPO NAPLES, F	RT ROAD, S	OUTH JS			
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 Can	npaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VS ( KROUT, HARO 521-31ST STF NAPLES, FL (	REET SW	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition KROUT, HAROLD E JR 521-31ST STREET SW NAPLES, FL 34117 US	
Title: Name: Address: City-St-Zip:	D ( LIEBIG, LISEL 254 GULFSHO NAPLES, FL (	DRE BL. S.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD ( LIEBIG, WOLF 1301 SPYGLA NAPLES, FL (	SS LANE	Title: Name: Address: City-St-Zip:	PD (X) Change ( ) Addition LIEBIG, WOLFGANG T 1111 GALLEON DR NAPLES, FL 34102 US	
Title: Name: Address: City-St-Zip:	V ( LIEBIG, THOM 256 GULF SHO NAPLES, FL (	ORE BL. S.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T ( IRVIN, KENNE 421 10TH ST I NAPLES, FL 3	NE .	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	V ( WILLIAMS, EI 424 FOX DEN		Title: Name: Address:	V (X) Change ( ) Addition LIEBIG, PATRICK T 256 GULF SHORE BL S	

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

City-St-Zip: NAPLES, FL 34102

SIGNATURE: HAROLD E KROUT JR S 04/25/2006

NAPLES, FL 34104

City-St-Zip: