

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2004 08:00 AM
Secretary of State

DOCUMENT # 501126 1. Entity Name EXECUTIVE CARS, INC.					
Principal Place of Business 9023 US 441 SOUTH LEESBURG, FL 34788			Mailing Address 9023 US 441 SOUTH LEESBURG, FL 34788		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FBI Number 59-1667718	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOWEN, LENNON E 111 1221 S. BAY ST EUSTIS, FL 32727				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DARROW, BONNIE M 590 BANNING BEACH RD TAVARES, FL 00000,	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DAROW, BONNIE M 590 BANNING BEACH RD TAVARES, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DARROW, CHARLES E 1414 E COVE PL TAVARES, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DARROW, JOHN A., JR. 41331 SHANE RD LEESBURG, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>JOHN A DARROW, JR</u> 1/15/04 352-728-4246					