2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#724466

Entity Name: CCAR SERVICES, INC.

FILED Mar 18, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
3530 ENTE	RPRISE WAY OVE SPRINGS		New P	rincipai Piace o	r Business:	
Current Mailing Address:				New Mailing Address:		
P.O. BOX 1 GREEN CO	248 OVE SPRINGS,	FL 32043				
FEI Number: 59-1478621 FEI Number Applied For () FEI N			FEI Number Not	umber Not Applicable () Certificate of Status Desired ()		
Name and	Address of Co	ırrent Registered Agent:	Name	and Address of	New Registered Age	ent:
1269 KING: ORANGE F	SOS, JOHN SLEY AVENUE PARK, FL 3207 named entity so		rpose of chang	ing its registered	office or registered ag	gent, or both,
SIGNATURE: Electronic Signature of Registered Agent			ıt		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	OAKES, GLEN D 7732 RIVER AVE		Title: Name: Address City-St-2	:) Change () Addition	
Title: Name: Address: City-St-Zip:	S () I KELLY, EDWAR 200 W. FORSYT JACKSONVILLE	H STREET	Title: Name: Address City-St-2	KELLY, EDW. : 200 W. FORS		
Title: Name: Address: City-St-Zip:	D () I BODENWEBER, 293 CROOKEDF ORANGE PARK,	IDGE COURT	Title: Name: Address City-St-2	;) Change () Addition	
Title: Name: Address: City-St-Zip:	MOORE, ARTHU 262 ST GEORGE		Title: Name: Address City-St-2	:) Change () Addition	
Title: Name: Address: City-St-Zip:	GORIA, ANTHON	RE POINT DRIVE	Title: Name: Address City-St-2	:) Change () Addition	
Title: Name: Address: City-St-Zip:	D () KOPELOUSOS, 1269 KINGSLEY ORANGE PARK,	AVENUE	Title: Name: Address City-St-2	KOPELOUSO : 1269 KINGSL		

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: D. GLEN OAKES P 03/18/2004