

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004277

FILED
Jan 29, 2007
Secretary of State

Entity Name: ELECTRIC MOBILITY CORPORATION

Current Principal Place of Business:

#1 MOBILITY PLAZA
SEWELL, NJ 08080

New Principal Place of Business:

591 MANTUA BLVD
SEWELL, NJ 08080

Current Mailing Address:

#1 MOBILITY PLAZA
SEWELL, NJ 08080

New Mailing Address:

591 MANTUA BLVD
SEWELL, NJ 08080

FEI Number: 22-2414579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDWELL, RICHARD
2600 DOUGLAS RD
305
CORAL SPRINGS, FL 33134 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: P () Delete
Name: FLOWERS, MICHAEL
Address: 591 MANTUA BLVD.
City-St-Zip: SEWELL, NJ 08080

Title: V () Delete
Name: FLOWERS, GEORGE
Address: 591 MANTUA BLVD.
City-St-Zip: SEWELL, NJ 08080

Title: S () Delete
Name: FLOWERS, SUSAN
Address: 591 MANTUA BLVD.
City-St-Zip: SEWELL, NJ 08080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLOWERS, MICHAEL
Address: 591 MANTUA BLVD
City-St-Zip: SEWELL, NJ 08080

Title: V (X) Change () Addition
Name: FLOWERS, GEORGE
Address: 591 MANTUA BLVD
City-St-Zip: SEWELL, NJ 08080

Title: S (X) Change () Addition
Name: FLOWERS, SUSAN
Address: 591 MANTUA BLVD
City-St-Zip: SEWELL, NJ 08080

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.

SIGNATURE: MICHAEL FLOWERS

P

01/29/2007

Electronic Signature of Signing Officer or Director

Date