

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006679

FILED
Apr 28, 2006
Secretary of State

Entity Name: ARISTOCRAT TRANSPORTATION OF FLORIDA, INC.

Current Principal Place of Business:

1935 SPRUCE AVE
ORLANDO, FL 32817 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 520052
LONGWOOD, FL 327520052

New Mailing Address:

P.O. BOX 263122
DAYTONA BEACH, FL 32126

FEI Number: 59-3652558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLAYER, GARRETT
615 PRESTON ROAD
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

TYLER, DONAGHY
121 CONE ROAD
ORMOND BEACH, FL, FL 32174 US

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: TYLER DONAGHY

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: KLAYER, GARRETT
Address: 615 PRESTON ROAD
City-St-Zip: LONGWOOD, FL 32750

Title: CD () Delete
Name: KLAYER, GARRETT
Address: 615 PRESTON ROAD
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: KLAYER, ANNE
Address: 615 PRESTON ROAD
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DONAGHY, TYLER
Address: 121 CONE ROAD
City-St-Zip: ORMOND BEACH, FL 32174

Title: CD (X) Change () Addition
Name: KLAYER, GARRETT
Address: 1440 N NOVA ROAD
City-St-Zip: HOLLY HILL, FL 32117

Title: D (X) Change () Addition
Name: DONAGHY, TYLER
Address: 121 CONE ROAD
City-St-Zip: ORMOND BEACH, FL 32174

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: GARRETT KLAYER

D

04/28/2006

Electronic Signature of Signing Officer or Director

Date