

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005469

FILED
Mar 05, 2008
Secretary of State

Entity Name: TOTAL FLEET SOLUTIONS, INC.

Current Principal Place of Business:

2108 PIONEER PKWY. WEST, STE. 113
ARLINGTON, TX 76013

New Principal Place of Business:

875 CONCOURSE PARKWAY SOUTH
SUITE 125
MAITLAND, FL 32751

Current Mailing Address:

2108 PIONEER PKWY. WEST, STE. 113
ARLINGTON, TX 76013

New Mailing Address:

875 CONCOURSE PARKWAY SOUTH
SUITE 125
MAITLAND, FL 32751

FEI Number: 75-2557969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHWW, INC.
390 N. ORANGE AVENUE, SUITE 1500
ORLANDO, FL 32801 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: PRES () Delete
Name: SUTTER, HANFORD A
Address: 123 STONEHILL DRIVE
City-St-Zip: MAITLAND, FL 32751

Title: VP () Delete
Name: SUTTER, NORINE R
Address: 123 STONEHILL DRIVE
City-St-Zip: MAITLAND, FL 32751

Title: VP () Delete
Name: TED, JAEGER
Address: 2108 PIONEER PARKWAY WEST
City-St-Zip: ARLINGTON, TX 76013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: TED, JAEGER
Address: 103 HICKORY SPRINGS DRIVE
City-St-Zip: EULESS, TX 76039

I hereby certify that the information supplied with this filing does not qualify 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: NORINE SUTTER

VP

03/05/2008

Electronic Signature of Signing Officer or Director

Date