2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2007
Secretary of State

DOCUMENT# F03000005446

Entity Name: SATURN OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

8620 S. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

8620 S. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 20-0334836 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PCD ( ) Delete
Name: DANIELS, ROLAND C
Address: 8620 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: VD ( ) Delete
Name: BELVISO, MARK R
Address: 8620 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: ST ( ) Delete
Name: VAN OSTRAND, MELISSA A
Address: 8620 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: D ( ) Delete
Name: MURDOCK, S E
Address: 8620 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: D (X) Delete
Name: JONES, S D
Address: 8620 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: D (X) Delete
Name: SCHUSTER, V A
Address: 100 RENAISSANCE CENTER, 5TH FLOOR
City-St-Zip: DETROIT, MI 482651000

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change ( ) Addition
Name: VAN OSTRAND, MELISSA A
Address: 8620 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: D (X) Change ( ) Addition
Name: MURDOCK, S E
Address: 8620 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32809

Title: D (X) Change ( ) Addition
Name: MOORE, J W
Address: 11700 GREAT OAKS WAY #400
City-St-Zip: ALPHARETTA, GA 30022

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

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

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: MELISSA A. VAN OSTRAND ST 01/23/2007

Electronic Signature of Signing Officer or Director — Date