## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F86660

Entity Name: FREEDOM FORD, INC.

FILED Mar 20, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 24825 US HIGHWAY 19N CLEARWATER, FL 33763 **Current Mailing Address: New Mailing Address:** 24825 US HIGHWAY 19N CLEARWATER, FL 33763 FEI Number: 59-2214873 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition Name: SMITH, B. SCOTT Name: SMITH, B. SCOTT 5401 E INDEPENDENCE BLVD 6415 IDLEWILD RD SUITE 109 Address: Address: City-St-Zip: CHARLOTTE, NC 28218 City-St-Zip: CHARLOTTE, NC 28212 Title: (X) Change ( ) Addition Title: () Delete COSS, STEPHEN K Name: Name: COSS. STEPHEN K 5401 E. INDEPENDENCE BLVD. 6415 IDLEWILD RD SUITE 109 Address: Address: CHARLOTTE, NC 28212 CHARLOTTE, NC 28212 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition VDT WRIGHT, THEODORE M IUPPENLATZ, MARK Name: Name: 5401 E INDEPENDENCE BLVD 6415 IDLEWILD RD SUITE 109 Address: Address: CHARLOTTE, NC 28218 City-St-Zip: CHARLOTTE, NC 28212 City-St-Zip: Title: () Delete Title: VP/T (X) Change ( ) Addition SMITH, O. BRUTON COSPER, DAVID P Name: Name: Address: 5401 E. INDEPENDENCE BLVD. Address: 6415 IDLEWILD RD SUITE 109 City-St-Zip: CHARLOTTE, NC 28212 City-St-Zip: CHARLOTTE, NC 28212 Title: ASAT Title: () Change () Addition () Delete MULLINS, MICHAEL E Name: Name: 21699 U.S. HWY 19 N Address: Address: City-St-Zip: CLEARWATER, FL 33765 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition Name: Name: DOBLER, SCOTT 24825 US HIGHWAY 19 N Address: Address: City-St-Zip: City-St-Zip: CLEARWATER, FL 33763

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: SHELLEY SIGAFOES CONT 03/20/2007