

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 31, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # G97528</b> 1. Entity Name <b>MCDONALD DRIVING SCHOOL, INC.</b>																													
Principal Place of Business <b>601 W.OAKLAND PK.BLVD., #26 FORT LAUDERDALE FL 33311</b>			Mailing Address <b>601 W.OAKLAND PK.BLVD., #26 FORT LAUDERDALE FL 33311</b>																										
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.																											
City & State  Zip      Country		City & State  Zip      Country		4. FEI Number <b>59-2558070</b> <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable																									
6. Name and Address of Current Registered Agent  <b>MCDONALD, EASTON 601 W.OAKLAND PK.BLVD., #26 FT. LAUDERDALE FL 33311</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code																											
8. 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. I am familiar with, and accept the obligations of registered agent.																													
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title (if applicable). (NOTE: Registered Agent signature required when forming corp.)</small>																													
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing <b>\$5.00</b> May Be Trust Fund Contribution <input type="checkbox"/> Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">D</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MCDONALD, EASTON</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>601 W OAKLAND PK BLVD #26</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>FORT LAUDERDALE FL 33311</td> <td></td> </tr> </table>			TITLE	D	<input type="checkbox"/> Delete	NAME	MCDONALD, EASTON		STREET ADDRESS	601 W OAKLAND PK BLVD #26		CITY- ST- ZIP	FORT LAUDERDALE FL 33311		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;"></td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY- ST- ZIP		
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1st MOORE      CR2E034 (10/07)

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Tracking Number

**1- 25-8 9545840322**