## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H25196

Address:

City-St-Zip:

2553 CANTERBURY DRIVE NORTH

WEST PALM BEACH, FL 33407

y Name: ELDER AUTOMOTIVE, INC.

FILED Jan 29, 2009 Secretary of State

| Entity Nai   | me: ELDER AUTOMO  | HVE, INC.   |   |   |  |
|--|---|---|---|---|--|
| Current Principal Place of Business:                 |   |   | New Principal Place                         | New Principal Place of Business:            |  |
|  | ORGIA AVENUE<br>LM BEACH, FL 33405  | US  |   |   |  |
| Current Mailing Address:                             |   |   | New Mailing Address                         | New Mailing Address:                        |  |
| 250 FLORIDA MANGO RD<br>WEST PALM BEACH, FL 33406 US |   | 2553 CANTERBURY DRIVE<br>WEST PALM BEACH, FL 33407 US |   |   |  |
| FEI Number:  | : 59-2453738 FEI Nur  | nber Applied For ( )                                  | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )           |  |
| Name and   | Address of Current R  | egistered Agent:                                      | Name and Address o                          | ame and Address of New Registered Agent:    |  |
| WEST PA  | IDA MANGO RD<br>LM BEACH, FL 33405  | US<br>nis statement for the p                         | purpose of changing its registered          | d office or registered agent, or both,      |  |
| SIGNATUR   | RE:   |   |   |   |  |
|  | Electronic Signat   | ure of Registered Ag                                  | ent   | Date  |  |
| Election Car   | mpaign Financing Trust Fu   | nd Contribution ( ).                                  |   |   |  |
| OFFICERS AND DIRECTORS:                              |   |   | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:          | PD () Delete<br>WESLEY, DONALD<br>250 FLORIDA MANGO RD<br>W. PALM BEACH, FL 334 |   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:          | VD () Delete<br>ELDER, WILLIAM<br>2020 MONICA DR.<br>W. PALM BEACH, FL 334      | 15  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                     |  |
| Title:<br>Name:                                      | STD () Delete   |   | Title:<br>Name:                             | ( ) Change ( ) Addition                     |  |

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.

Address:

City-St-Zip:

SIGNATURE: JAMES ELDER STD 01/29/2009