


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # L64639	
1. Entity Name ALTERNATIVE AUTOMOTIVE, INC.	

Principal Place of Business C/O HOWARD A. WOODRUFF 6945 VICKIE CIR W. MELBOURNE, FL 32904	Mailing Address C/O HOWARD A. WOODRUFF 6945 VICKIE CIR W. MELBOURNE, FL 32904
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DO NOT WRITE IN THIS SPACE



01112006 No Chg-P CRZE034 (11/05)

4. FEI Number 59-3035178	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOODRUFF, ELLEN K.
339 NORWOOD AVE
SATELLITE BCH, FL 32937

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when renating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WOODRUFF, HOWARD A. 339 NORWOOD AVE SATELLITE BCH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V WOODRUFF, EVELYN M 758 APOLLO CIR NE PALM BAY, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WOODREFF, ELLEN K. 339 NORWOOD AVE SATELLITE BCH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000411435
02/10/06-80007-002 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Howard A. Woodruff HOWARD A. WOODRUFF PRESIDENT 1/23/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #