2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2009
Secretary of State

DOCUMENT# M96341

Entity Name: DEALER SUPPORT, INC.

Current Principal Place of Business:

C/O EDWIN EARL LAMB
150 N MILITARY TR
WEST PALM BEACH, FL 33415

New Principal Place of Business:

Current Mailing Address:

C/O EDWIN EARL LAMB
150 N MILITARY TR
WEST PALM BEACH, FL 33415

New Mailing Address:

FEI Number: 65-0104876 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMB, EDWIN EARL
1656 LINDA LOU DR
WEST PALM BEACH, FL 33415 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: PD ( ) Delete
Name: LAMB, EDWIN EARL,
Address: 1656 LINDA LOU DR
City-St-Zip: W. PALM BCH, FL

Title: STD ( ) Delete
Name: BOLZ, ERIC HAROLD,
Address: 2515 FLAMANGO LAKE DR
City-St-Zip: W. PALM BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: EDWIN EARL LAMB PD 03/14/2009

Electronic Signature of Signing Officer or Director — Date