

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M96341

FILED  
Jan 23, 2012  
Secretary of State

Entity Name: DEALER SUPPORT, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

C/O EDWIN EARL LAMB  
2328 S CONGRESS AVE, STE 1A  
WEST PALM BEACH, FL 33406 US

**Current Mailing Address:**

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

**New Mailing Address:**

C/O EDWIN EARL LAMB  
2328 S CONGRESS AVE, STE 1A  
WEST PALM BEACH, FL 33406 US

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:**

LAMB, EDWIN E  
1656 LINDA LOU DR  
WEST PALM BEACH, FL 33415 US

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: EDWIN E LAMB

01/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LAMB, EDWIN EARL  
Address: 1656 LINDA LOU DR  
City-St-Zip: W. PALM BCH, FL 33415 US

Title: STD  
Name: BOLZ, ERIC HAROLD  
Address: 2515 FLAMANGO LAKE DR  
City-St-Zip: W. PALM BCH, FL 33406 US

I hereby 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 all other like empowered.

SIGNATURE: ERIC HAROLD BOLZ

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01/23/2012

Electronic Signature of Signing Officer or Director

Date