

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004255

FILED
Apr 30, 2007
Secretary of State

Entity Name: CART - COALITION AGAINST RUNAWAY TAXATION, INC.

Current Principal Place of Business:

618 BARONET LN
HOLMES BEACH, FL 34217

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1849
ANNA MARIA, FL 34216

New Mailing Address:

P.O. BOX 1212
HOLMES BEACH, FL 34217

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBB, CHARLES H
3909 EAST BAY DR.
SUITE 115
HOLMES BEACH, FL 34217 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

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: SCHRODER, DONALD
Address: 618 BARONET LN
City-St-Zip: HOLMES BEACH, FL 34217

Title: V () Delete
Name: SAWE, ASHOK
Address: 207 66TH STREET
City-St-Zip: HOLMES BEACH, FL 34217

Title: S () Delete
Name: MUSIL-BUEHLER, SABINE
Address: 8102 GULF DR
City-St-Zip: HOLMES BEACH, FL 34217

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MUSIL-BUEHLER, SABINE
Address: 8102 GULF DR
City-St-Zip: HOLMES BEACH, FL 34217

Title: SEC () Change (X) Addition
Name: GOULD, BARRY
Address: 6311 GULF DRIVE
City-St-Zip: HOLMES BEACH, FL 34217

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD SCHRODER

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date