

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001155

FILED
Feb 14, 2007
Secretary of State

Entity Name: MODEL-A'S, INC.

Current Principal Place of Business:

348 EDEN ROAD
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

C/O ALAN LINDSAY, ESQ.
P.O. BOX 431
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 65-0648341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDSAY, ALAN
340 ROYAL POINCIANA WAY, #321
PALM BEACH, FL 33480 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: DPST () Delete
Name: DONNELLEY, ELLIOTT R
Address: 348 EDEN ROAD
City-St-Zip: PALM BEACH, FL 33480

Title: DV () Delete
Name: LINDSAY, ALAN
Address: 340 ROYAL POINCIANA WAY, #321
City-St-Zip: PALM BEACH, FL 33480

Title: DV () Delete
Name: DONNELLEY, SHAWN
Address: 340 ROYAL POINCIANA WAY, #321
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: BAKER, DAVID H
Address: 340 ROYAL POINCIANA WAY, #321
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: ALAN LINDSAY

V

02/14/2007

Electronic Signature of Signing Officer or Director

Date