2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003771

FILED Mar 17, 2009 Secretary of State

Entity Name: HOT WHEELS CAR CLUB OF PANAMA CITY, INC.

Current Principal Place of Business: New Principal Place of Business:

316 MERCEDES AVE 3470 CHERRY RIDGE RD. PANAMA CITY, FL 32401 LYNN HAVEN, FL 32444 US

Current Mailing Address: New Mailing Address:

316 MERCEDES AVE 3470 CHERRY RIDGE RD. PANAMA CITY, FL 32401 LYNN HAVEN, FL 32444 US

FEI Number: 59-3528284 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KIDD, PHYLLIS

316 MERCEDES AVE

PANAMA CITY, FL 32401 US

SANDERS, RUSSELL L TREAS
3470 CHERRY RIDGE RD
LYNN HAVEN, FL 32444 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: RUSSELL L. SANDERS 03/17/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: VP (X) Change () Addition Name: MERRIT, STEVE Name: KIDD, MIKE

Address: P.O. BOX 805 Address: 316 MERCEDES AVE
City-St-Zip: LYNN HAVEN, FL 32444 City-St-Zip: PANAMA CITY, FL 32401 US

Title: TD () Delete Title: TD (X) Change () Addition Name: PHYLLIS, KIDD L Name: SANDERS, RUSSELL L

Address: 316 MERCEDES AVE. Address: 3470 CHERRY RIDGE RD
City-St-Zip: PANAMA CITY, FL 32401 City-St-Zip: LYNN HAVEN, FL 32444 US

Title: SD () Delete Title: () Change () Addition

 Name:
 JOHNSON, GARY
 Name:

 Address:
 813 FLIGHT AVE.
 Address:

 City-St-Zip:
 PANAMA CITY, FL 32404
 City-St-Zip:

Name:BELLOMY, GARYName:BELLOMY, GARYAddress:321 MERCEDES AVE.Address:321 MERCEDES AVE.City-St-Zip:PANAMA CITY, FL 32401City-St-Zip:PANAMA CITY, FL 32401

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: RUSSELL L. SANDERS TREA 03/17/2009