2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# N98000003977

Entity Name: CITRUS CARS OF POLK COUNTY, INC.

Current Principal Place of Business:

205 E MAIN ST, STE 107
BARTOW, FL 33830

New Principal Place of Business:

205 E MAIN STREET
SUITE #107
BARTOW, FL 33830

Current Mailing Address:

205 E MAIN ST, STE 107
BARTOW, FL 33830

New Mailing Address:

205 E MAIN STREET
SUITE #107
BARTOW, FL 33830

FEI Number: 59-3528855 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LANG, THOMAS F
SHUFFIELD, LOWMAN & WILSON, P.A.
GATEWAY CTR 1000 LEGION PLACE STE 1700
ORLANDO, FL 32801 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: PD ( ) Delete
Name: STEDEM, MIKE
Address: P.O BOX 976
City-St-Zip: FORT MEADE, FL 33841

Title: CD (X) Delete
Name: CLARK, TOM
Address: 12 BRIDGEWATER DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: TD (X) Delete
Name: YOUNG, ELIZABETH
Address: 720 DELAWARE AVENUE
City-St-Zip: FT. PIERCE, FL 34950

Title: D (X) Delete
Name: THOMPSON, NANCY
Address: 205 EAST MAIN STREET, SUITE #107
City-St-Zip: BARTOW, FL 33830

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: MIKE STEDEM PD 04/24/2007

Electronic Signature of Signing Officer or Director — Date