## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000036091

LOVELL, MARIE T

17617 LONG RIDGE DRIVE

MONTVERDE, FL 34756

Name:

Address: City-St-Zip:

Entity Name: DIESEL SPECIALISTS OF ORLANDO, INC.

FILED Jan 07, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 9400 SIDNEY HAYES ROAD ORLANDO, FL 32824 **Current Mailing Address: New Mailing Address:** 9400 SIDNEY HAYES ROAD ORLANDO, FL 32824 FEI Number: 59-3639146 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: GOODBLATT, AMY E ESQ 221 NE IVANHOE BLVD., SUITE 205 ORLANDO, FL 32809 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition LOVELL, MARIE Name: Name: 17617 LONG RIDGE DRIVE Address: Address: City-St-Zip: MONTVERDE, FL 34756 City-St-Zip: ( ) Delete Title: PRES Title: () Change () Addition LOVELL, MARK A Name: Name: 17617 LONG RIDGE DRIVE Address: Address: MONTVERDE, FL 34756 City-St-Zip: City-St-Zip: Title: Title: TRFA ( ) Delete () Change () Addition

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

Name:

Address:

City-St-Zip:

SIGNATURE: MARIE T. LOVELL TREA 01/07/2008