2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000031525

Entity Name: THE TRANS-CAR CORPORATION

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12865 SE HWY 441 1889 N. MAIN ST SUMMERFIELD, FL 34491 US US BELL, FL 32619 **Current Mailing Address: New Mailing Address:** PO BOX 1298 SUMMERFIELD, FL 34492 US FEI Number: 50-0000325 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: QUINN, RICHARD R 9131 SE 156 ST SUMMERFIELD, FL 34491 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PD () Delete Title: (X) Change () Addition QUINN, RICHARD R QUINN, RICHARD R Name: Name: PO BOX 1298 PO BOX 1298 Address: Address: City-St-Zip: SUMMERFIELD, FL 34491 US City-St-Zip: SUMMERFIELD, FL 34491 US Title: () Delete Title: () Change (X) Addition QUINN, RICHARD R Name: Name: PO BOX 1298 Address: Address: SUMMERFIELD, FL 34492 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition Name: QUINN, RICHARD R Name: PO BOX 1298 Address Address: City-St-Zip: City-St-Zip: BELL, FL 34492 Title: () Delete Title: () Change (X) Addition QUINN, RICHARD R Name: Name: Address: Address: PO BOX 1298 City-St-Zip: City-St-Zip: SUMMERFIELD, FL 34492

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.

SIGNATURE: RICHARD R. QUINN PD 04/16/2008