2005 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL	KEPURI			
DOCUMENT # P0100007116 1. Entity Name CAR FINDERS, INC.	35		FILED 05 APR 27 PM 3:21	
	Mailing Address		SECINE LANGE FLORIDA TALLAHASSEE, FLORIDA	
1015 CAPITAL CIR. NW	302 INGLEWOOD DR.		TAILAHASSEE, FLURIDA	
TALLAHASSEE, FL 32304	TALLAHASSEE, FL 32301		Merch	
DO NOT WRITE IN THIS SPACE				
		CE	02172005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For	
		_	59-3741291 Not Applicat	
6. Name and Address of Current Decisions Accord			5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			-	
WHEELER, JOHN H 1015 CAPITAL CIR. NW		DO NOT WRITE		
TALLAHASSEE, FL 32304		IN THIS SPACE		
8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent aignature required when reinstating) DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	 Election Campaign Finand Trust Fund Contribution. 		5.00 May Be ded to Fees	
10. OFFICERS AND DIRECTORS				
TRE PO				
NAME WHEELER, JOHN H STREET ADDRESS 302 INGLEWOOD DR				
CITY-ST-ZIP TALLAHASSEE, FL 32302				
TITLE			00000	
NAME			900054202389 05/10/0501034011 **158.75	
STREET ADDRESS			05/10/05-01054-011 **158.75	
CITY-ST-ZIP				
TITLE NAME				
STREET ADDRESS		_	DO NOT WRITE	
CITY-ST-ZIP				
TITLE NAME			IN THIS SPACE	
STREET ADDRESS				
CITY-ST-ZIP ITILE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP		L	and 110 07/0V() Floride Chab are 15 the annual to the control of	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Rorida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if				
changed, or on an attachment with an address, with all other like empowered.				
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylors Phone 4				