2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000019954

FILED Apr 29, 2008 Secretary of State

Entity Name: ALMOST NEW AUTO SALES, INC. **Current Principal Place of Business: New Principal Place of Business:** 2602 SANFORD AVE SANFORD, FL 32773 **Current Mailing Address: New Mailing Address:** 2602 SANFORD AVE SANFORD, FL 32773 FEI Number: 01-0600520 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: MACMILLAN, SUE 2602 SANFORD AVE SANFORD, FL 32773 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

Title:

Name:

OFFICERS AND DIRECTORS:

MACMILLAN, SUE

() Delete

Title:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MACMILLAN, JAMES A

(X) Change () Addition

2602 SANFORD AVE 2602 SANFORD AVE Address: Address: City-St-Zip: SANFORD, FL 32773 City-St-Zip: SANFORD, FL 32773 () Delete Title: Title: PRES () Change (X) Addition MACMILLAN, SUE Name: Name: 2602 SANFORD AV Address: Address: SANFORD, FL 32773 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition Name: MACMILLAN, SUE Name: 2602 SANFORD AV Address: Address: City-St-Zip: City-St-Zip: SANFORD, FL 32773

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: JAMES MACMILLAN 04/29/2008 DIR