

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071317

Entity Name: EXSEL AUTO, INC.

FILED  
Apr 03, 2006  
Secretary of State

## Current Principal Place of Business:

3416 SHADER RD.  
#112  
ORLANDO, FL 32808

## New Principal Place of Business:

## Current Mailing Address:

3416 SHADER RD.  
#112  
ORLANDO, FL 32808

## New Mailing Address:

FEI Number: 82-0551789

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRANKER, DAVID R P  
343 FLYROD CIRCLE  
ORLANDO, FL 32808 US

## Name and Address of New Registered Agent:

BRANKER, DAVID R P  
343 FLYROD CIRCLE  
ORLANDO, FL 32825 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: D. BRANKER

04/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: ROSE, ALLISON M  
Address: 3009 WINFIELD ST.  
City-St-Zip: ORLANDO, FL 32810

Title: P (X) Delete  
Name: BRANKER, DAVID R  
Address: 343 FLYROD CIRCLE  
City-St-Zip: ORLANDO, FL 32808

Title: O (X) Delete  
Name: WILLIAMS, ALEC  
Address: 5815 WOODLAND BLVD  
City-St-Zip: TAMARAC, FL 33319

Title: O (X) Delete  
Name: CHAMBERS, ROMERO  
Address: 5815 WOODLAND  
City-St-Zip: TAMARAC, FL 33319

Title: O (X) Delete  
Name: PETERSON, JOSEPH  
Address: 4211NORTH OBT D7  
City-St-Zip: ORLANDO, FL 32804

Title: O (X) Delete  
Name: NILES, IAN  
Address: 715 ISLETON DR  
City-St-Zip: BRANDON, FL 33511

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition  
Name: WILLIAMS, ALEC  
Address: 5815 WOODLAND BLVD  
City-St-Zip: TAMARAC, FL 33319

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:

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

SIGNATURE: A. WILLIAMS

O

04/03/2006

Electronic Signature of Signing Officer or Director

Date