

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000091535

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: AUTO CONTROL TRAINING, INC.

## Current Principal Place of Business:

4115 LAURELWOOD LN  
DELRAY BEACH, FL 33445

## New Principal Place of Business:

737 LUNA DR  
ORMAND BEACH, FL 32176

## Current Mailing Address:

4115 LAURELWOOD LN  
DELRAY BEACH, FL 33445

## New Mailing Address:

23 MAJESTIC AVE  
NASHUA, NH 03063

FEI Number: 56-2288740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STANLEY, EDWARD G  
4115 LAURELWOOD LN  
DELRAY BEACH, FL 33445 US

## Name and Address of New Registered Agent:

MARTIN, STEVE  
737 LUNA DR  
ORMAND BEACH, FL 32176 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: STEVE MARTIN

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: STANLEY, EDWARD G  
Address: 4115 LAURELWOOD LN  
City-St-Zip: DELRAY BEACH, FL 33445

Title: TR ( ) Delete  
Name: STANLEY, EDWARD G  
Address: 4115 LAURELWOOD LN  
City-St-Zip: DELRAY BEACH, FL 33445

Title: CL ( ) Delete  
Name: STANLEY, EDWARD G  
Address: 4115 LAURELWOOD LN  
City-St-Zip: DELRAY BEACH, FL 33445

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: STANLEY, EDWARD G  
Address: 23 MAJESTIC AVE  
City-St-Zip: NASHUA, NH 03063

Title: TR (X) Change ( ) Addition  
Name: STANLEY, EDWARD G  
Address: 23 MAJESTIC AVE  
City-St-Zip: NASHUA, NH 03063

Title: CL (X) Change ( ) Addition  
Name: STANLEY, EDWARD G  
Address: 23 MAJESTIC AVE  
City-St-Zip: NASHUA, NH 03063

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: EDWARD G. STANLEY

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

Date