

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015126

FILED  
Mar 16, 2006  
Secretary of State

Entity Name: DIRECT AUTOMOTIVE WHOLESALE, INC.

## Current Principal Place of Business:

403 W JEFFERSON STREET  
QUINCY, FL 32351 US

## New Principal Place of Business:

## Current Mailing Address:

529 UNITED STREET  
KEY WEST, FL 32340 US

## New Mailing Address:

1421 1ST STREET  
KEY WEST, FL 32340 US

FEI Number: 11-3676344

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CLEGHORN, JOE D  
527 RIVER ROAD  
CARABELLE, FL 32322 US

## Name and Address of New Registered Agent:

CLEGHORN, JOE D  
616 HECK AVENUE  
LITTLE TORCH KEY, FL 33042 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:

03/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: CLEGHORN, JOE D  
Address: 1582 HWY 98 WEST  
City-St-Zip: CARABELLE, FL 32322 US

Title: VS ( ) Delete  
Name: CLEGHORN, BETTY B  
Address: 1582 HWY 98 WEST  
City-St-Zip: CARABELLE, FL 32322 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: CLEGHORN, JOE D  
Address: 616 HECK AVENUE  
City-St-Zip: LITTLE TORCH KEY, FL 33040 US

Title: VS (X) Change ( ) Addition  
Name: CLEGHORN, BETTY B  
Address: 616 HECK AVENUE  
City-St-Zip: LITTLE TORCH KEY, FL 33040 US

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: JOE D CLEGHORN

PT

03/16/2006

Electronic Signature of Signing Officer or Director

Date