

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055598

Entity Name: CENTRAL FLORIDA 4X4, INC.

FILED  
Apr 27, 2005  
Secretary of State

## Current Principal Place of Business:

842 DIPLOMAT DR STE 101  
DEBARY, FL 32713

## New Principal Place of Business:

1200 FLOWING CREEK WAY  
OSTEEN, FL 32764

## Current Mailing Address:

842 DIPLOMAT DR STE 101  
DEBARY, FL 32713

## New Mailing Address:

1200 FLOWING CREEK WAY  
OSTEEN, FL 32764

FEI Number: 75-3113957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOVE, JEFFREY S  
842 DIPLOMAT DR STE 101  
DEBARY, FL 32713 US

## Name and Address of New Registered Agent:

LOVE, JEFFREY S  
1200 FLOWING CREEK WAY  
OSTEEN, FL 32764 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:

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LOVE, JEFFREY S  
Address: 842 DIPLOMAT DR STE 101  
City-St-Zip: DEBARY, FL 32713

Title: VP ( ) Delete  
Name: LOVE, JAMEE L  
Address: 842 DIPLOMAT DR STE 101  
City-St-Zip: DEBARY, FL 32713

Title: S/T ( ) Delete  
Name: CLARK, JOAN  
Address: 842 DIPLOMAT DR STE 101  
City-St-Zip: DEBARY, FL 32713

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LOVE, JEFFREY S  
Address: 1200 FLOWING CREEK WAY  
City-St-Zip: OSTEEN, FL 32764

Title: VP (X) Change ( ) Addition  
Name: LOVE, JAMEE L  
Address: 1200 FLOWING CREEK WAY  
City-St-Zip: OSTEEN, FL 32764

Title: S/T (X) Change ( ) Addition  
Name: CLARK, JOAN  
Address: 10114 EAST HIGHWAY 16  
City-St-Zip: COMBS, AR 72721

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMEE L. LOVE

VP

04/27/2005

Electronic Signature of Signing Officer or Director

Date