

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 8:00 am
Secretary of State

01-22-2008 90079 035 ***150.00

DOCUMENT # P03000069613

1. Entity Name
CLAUDE'S CAR COLLECTION, INC.



Principal Place of Business
**976 BREVARD AVE
STE A
ROCKLEDGE, FL 32955**

Mailing Address
**976 BREVARD AVE
STE A
ROCKLEDGE, FL 32955**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01162008

Chg-P

CR2E034 (12/06)

4. FEI Number
56-2378036

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SOILEAU, JOHN L
3490 N US HWY 1
COCOA, FL 32926**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature of the current registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D IMHOOF, CLAUDE**
STREET ADDRESS **93 DELANNOY AVE SUITE 806**
CITY-STATE-ZIP **COCOA, FL 32922**

TITLE ☐ Delete
NAME **D MAIBACH, ANNE**
STREET ADDRESS **93 DELANNOY AVE SUITE 806**
CITY-STATE-ZIP **COCOA, FL 32922**

TITLE ☐ Delete
NAME **D HARRIS, DEWEY L**
STREET ADDRESS **976 BREVARD AVE STE A**
CITY-STATE-ZIP **ROCKLEDGE, FL 32955**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **976 BREVARD AVENUE, SUITE A**
CITY-STATE-ZIP **ROCKLEDGE, FL 32955**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **976 BREVARD AVENUE, SUITE A**
CITY-STATE-ZIP **ROCKLEDGE, FL 32955**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
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CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dewey L. Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-08

Date

321-433-1191

Daytime Phone #