

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000066128

FILED
Apr 20, 2009
Secretary of State

Entity Name: LITHIA CROSSINGS HOLDINGS, INC.

Current Principal Place of Business:

3400 LITHIA PINECREST ROAD
VALRICO, FL 33596

New Principal Place of Business:

Current Mailing Address:

12570 TELECOM DRIVE
TEMPLE TERRACE, FL 33637

New Mailing Address:

FEI Number: 20-1200470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACFARLANE, ELLEN M
400 NORTH TAMPA STREET
SUITE 2300
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COMER, GORDON
Address: 12570 TELECOM ROAD
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: D () Delete
Name: HOLDEN, PETER
Address: 12570 TELECOM ROAD
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: D () Delete
Name: SARAIYA, DR.
Address: 12570 TELECOM ROAD
City-St-Zip: TEMPLE TERRACE, FL 33637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COMER, GORDON
Address: 12570 TELECOM DRIVE
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: D (X) Change () Addition
Name: HOLDEN, PETER
Address: 12570 TELECOM DRIVE
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: D (X) Change () Addition
Name: SARAIYA, DR.
Address: 12570 TELECOM DRIVE
City-St-Zip: TEMPLE TERRACE, FL 33637

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: GORDON COMER

D

04/20/2009

Electronic Signature of Signing Officer or Director

Date