

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000016721

Entity Name: FREEDOM CARS, INC.

**FILED**  
**Apr 23, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

6717 BENJAMIN RD.  
TAMPA, FL 33634

**New Principal Place of Business:**

6717 BENJAMIN RD. UNIT # 4-10  
TAMPA, FL 33634

**Current Mailing Address:**

15502 WOODFAIR PLACE  
TAMPA, FL 33613

**New Mailing Address:**

FEI Number: 20-2229583

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SEITZ, HEIDI  
15502 WOODFAIR PLACE  
TAMPA, FL 33613 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SEITZ, HEIDI  
Address: 15502 WOODFAIR PLACE  
City-St-Zip: TAMPA, FL 33613 US

Title: SEC ( ) Delete  
Name: SEITZ, LEWIS  
Address: 17130 HANNA ROAD  
City-St-Zip: LUTZ, FL 33549 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: HEIDI SEITZ

PRES

04/23/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date