

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000037979

Entity Name: C&D AUTO TRANSPORT, INC.

FILED
Jan 04, 2008
Secretary of State

Current Principal Place of Business:

116 ROLLINS ROAD
INTERLACHEN, FL 32148

New Principal Place of Business:

116 ROLLINS ROAD
P. O. BOX 164
INTERLACHEN, FL 32148

Current Mailing Address:

P.O. BOX 164
INTERLACHEN, FL 32148

New Mailing Address:

FEI Number: 20-2316517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REID, DONNA K
116 ROLLINS ROAD
INTERLACHEN, FL 32148 US

Name and Address of New Registered Agent:

REID, DONNA K
116 ROLLINS ROAD
BOX 164
INTERLACHEN, FL 32148 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:

01/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: REID, CLYDE H JR
Address: P.O. BOX 164
City-St-Zip: INTERLACHEN, FL 32148

Title: SEC () Delete
Name: REID, DONNA K
Address: P.O. BOX 164
City-St-Zip: INTERLACHEN, FL 32148

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: DONNA K. REID

SEC

01/04/2008

Electronic Signature of Signing Officer or Director

Date