2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000044332

Entity Name: MAX AUTO GROUP INC.

FILED Jun 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1279 GEORGIA AVE BAKER, FL 32531 US

Current Mailing Address: New Mailing Address:

PO BOX 645

DEFUNIAK SPRINGS, FL 32435 US

FEI Number: 20-2555826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOWELL, JAMES W
443 SHOEMAKER DRIVE
443 SHOEMAKER DRIVE

DEFUNIAK SPRINGS, FL 32435 US DEFUNIAK SPRINGS, FL 32433 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: JAMES W HOWELL, PD, S 06/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 HOWELL, JAMES W
 Name:
 HOWELL, JAMES W

 Address:
 21 WEST MAIN AVE
 Address:
 443 SHOEMAKER DRIVE

City-St-Zip: DEFUNIAK SPRINGS, FL 32435 US City-St-Zip: DEFUNIAK SPRINGS, FL 32433 US

Title: VP,T () Delete Title: T (X) Change () Addition Name: MCLENDON, ROBERT D Name: MCLENDON, ROBERT D

Address: 1279 GEORGIA AVENUE Address: 1279 GEORGIA AVENUE City-St-Zip: BAKER, FL 32531 US City-St-Zip: BAKER, FL 32531 US

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 MCLENDON, CLAIBORN D

 Address:
 Address:
 1279 GEORGIA AVENUE

 City-St-Zip:
 City-St-Zip:
 BAKER, FL 32531

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: JAMES W HOWELL PD 06/19/2009