

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000093037

FILED
May 12, 2008
Secretary of State**Entity Name:** COVER ALL DRIVERS, INC.**Current Principal Place of Business:**3835 B N 50TH STREET
TAMPA, FL 33619**New Principal Place of Business:****Current Mailing Address:**3835 B N 50TH STREET
TAMPA, FL 33619**New Mailing Address:****FEI Number:** 25-1920882**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RICCHINO, LAURA
25410 OAKS BLVD
LAND O'LAKES, FL 34639 US**Name and Address of New Registered Agent:**RICCHINO, LAURA
3835B N 50TH STREET
TAMPA, FL 33619 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: LAURA RICCHINO

05/12/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RICCHINO, LAURA
Address: 25410 OAKS BLVD
City-St-Zip: LAND O'LAKES, FL 34639

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RICCHINO, LAURA
Address: 3835B N. 50TH ST
City-St-Zip: TAMPA, FL 33619

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: LAURA RICCHINO

PRES

05/12/2008

Electronic Signature of Signing Officer or Director

Date