

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000005422

FILED
Apr 30, 2008
Secretary of State

Entity Name: AMERICAN CAR CARE II, INC.

Current Principal Place of Business:

280 WEST BAY DRIVE
LARGO, FL 33770

New Principal Place of Business:

280 WEST BAY DRIVE
LARGO, FL 33770 US

Current Mailing Address:

280 WEST BAY DRIVE
LARGO, FL 33770

New Mailing Address:

280 WEST BAY DRIVE
LARGO, FL 33770 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CATON, RICHARD P
9075 SEMINOLE BLVD.
SEMINOLE, FL 33772 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: KOVACH, THOMAS J
Address: 280 WEST BAY DRIVE
City-St-Zip: LARGO, FL 33770 US

Title: VP () Change (X) Addition
Name: LEACH, STEVEN A
Address: 280 WEST BAY DRIVE
City-St-Zip: LARGO, FL 33770 US

Title: T () Change (X) Addition
Name: LEACH, KIMBERLY D
Address: 280 WEST BAY DRIVE
City-St-Zip: LARGO, FL 33770 US

Title: S () Change (X) Addition
Name: KOVACH, CONNIE L
Address: 280 WEST BAY DRIVE
City-St-Zip: LARGO, FL 33770 US

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: STEVE LEACH

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date