2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000093966

Entity Name: PITSTOP 500 DEVELOPMENT, CORP.

FILED Aug 21, 2008 Secretary of State

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

4 STATE STREET 608 INGRAHAM AVE DAVENPORT, FL 33837 SUITE B

HAINES CITY, FL 33844

Current Mailing Address: New Mailing Address:

4 STATE STREET 608 INGRAHAM AVE DAVENPORT, FL 33837

SUITE B

HAINES CITY, FL 33844

FEI Number: 26-0761818 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:

BRINSON, J. KEMP STRAUGHN, TURNER & SMITH, P.A. 255 MAGNOLIA AVENUE, SW 255 MAGNOLIA AVENUE, SW WINTER HAVEN, FL 33880 WINTER HAVEN, FL 33880

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: JAN FLAMMER 08/21/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete FLAMMER, JAN FLAMMER, JAN Name: Name:

4 STATE STREET 608 INGRAHAM AVE SUITE B Address: Address: City-St-Zip: DAVENPORT, FL 33837 City-St-Zip: HAINES CITY, FL 33844

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

Name: MALONE, KATHLEEN Name: MALONE, KATHLEEN 4 STATE STREET 608 INGRAHAM AVE SUITE B Address: Address: DAVENPORT, FL 33837 HAINES CITY, FL 33844 City-St-Zip: City-St-Zip:

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

KOENIGSBERG, JAY Name: KOENIGSBERG, JAY Name: 4 STATE STREET 608 INGRAHAM AVE SUITE B Address: Address: City-St-Zip: DAVENPORT, FL 33837 City-St-Zip: HAINES CITY, FL 33844

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: JAN FLAMMER SEC 08/21/2008