## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000117559

Entity Name: WHEELEAZY, INC.

Title:

Name:

Address:

City-St-Zip:

**FILED** Mar 06, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3842 NIGHTHAWK DRIVE PALM HARBOR, FL 34684 **Current Mailing Address: New Mailing Address:** 2917 ST. ANDREWS BLVD 3842 NIGHTHAWK DRIVE PALM HARBOR, FL 34684 TARPON SPRINGS, FL 34688 FEI Number: 26-1342669 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: ALESSI, JENNIFER P 2917 ST. ANDREWS BLVD TARPON SPRINGS, FL 34688 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition ELFLEIN, FREDERICK R JR ELFLEIN, FREDERICK R JR Name: Name: 5504 BELSTEAD COURT 5504 BELSTEAD COURT Address: Address: City-St-Zip: GLENN ALLEN, VA 23059 City-St-Zip: GLENN ALLEN, VA 23059 ( ) Delete VΡ Title: (X) Change ( ) Addition Title: Name: ELFLEIN, MATTHEW M Name: ELFLEIN, MATTHEW M 3842 NIGHTHAWK DRIVE 3842 NIGHTHAWK DRIVE Address: Address: PALM HARBOR, FL 34684 PALM HARBOR, FL 34684 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition ELFLEIN, FREDERICK R JR Name: Name: 5504 BELSTEAD COURT Address: Address: City-St-Zip: GLENN ALLEN, VA 23059 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.

Title:

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: MATTHEW M. ELFLEIN 03/06/2008

() Delete

ELFLEIN, MATTHEW M

3842 NIGHTHAWK DRIVE

PALM HARBOR, FL 34684

(X) Change ( ) Addition

CUMMINGS, KIMBERLEY J

204 BUCKINGHAM AVE. E.

OLDSMAR, FL 34677