2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000042830

Entity Name: RUFUS BROWN'S ELITE MOTORS INC.

FILED Mar 11, 2009 Secretary of State

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

7200 US HWY 27 N SEBRING, FL 33870

Current Mailing Address: New Mailing Address:

7200 US HWY 27 N SEBRING, FL 33870

FEI Number: 32-0248131 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:

BROWN, RUFUS D

1432 VICKI DRIVE

SEBRING, FL 33870

US

LOVELETTE, TERESA A
7200 US HWY 27 N.
SEBRING, FL 33870 US

SEBRING, FL 33870 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: TERESA A LOVELETTE 03/11/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT () Delete Title: PRES (X) Change () Addition Name: BROWN, RUFUS D Name: JOHN, TRACEY

 Name:
 BROWN, RUFUS D
 Name:
 JOHN, TRACEY

 Address:
 1432 VICKI DRIVE
 Address:
 1302 TALBOTT CIRCLE

 City-St-Zip:
 SEBRING, FL 33870
 City-St-Zip:
 AVON PARK, FL 33825

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

 Name:
 LOVELETTE, TERESA A
 Name:
 LOVELETTE, TERESA A

 Address:
 38 HIDDEN HARBOR LANE
 Address:
 38 HIDDEN HARBOR LANE

Address: 38 HIDDEN HARBOR LANE Address: 38 HIDDEN HARBOR LANE City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: LAKE PLACID, FL 33852

Title: () Delete Title: S /T () Change (X) Addition Name: LOVELETTE, JOHN A

Address: Address: 38 HIDDEN HARBOR LANE
City-St-Zip: City-St-Zip: LAKE PLACID, FL 33852

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

 Name:
 Name:
 R. ANTHONY, COZIER

 Address:
 Address:
 100 SHORELINE DRIVE

 City-St-Zip:
 City-St-Zip:
 LAKE PLACID, FL 33852

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: TERESA A.LOVELETTE VP 03/11/2009