## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000072298

FILED Jul 03, 2009 Secretary of State

Entity Name: AUTOCRICKET CORP. **Current Principal Place of Business: New Principal Place of Business:** 2650 LAKESHORE DRIVE #1405 RIVIERA BEACH, FL 33404 **Current Mailing Address: New Mailing Address:** 2650 LAKESHORE DRIVE #1405 RIVIERA BEACH, FL 33404 FEI Number: 26-3100930 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: **BUSINESS FILINGS INCORPORATED** BRIAN, JASON 1203 GOVERNORS SQUARE BLVD., SUITE 101 2650 LAKESHORE DRIVE #1405 RIVIERA BEACH, FL 33404 TALLAHASSEE, FL 323012960 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: JASON BRIAN 07/03/2009 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BRIAN, JASON Name: Name: 2650 LAKESHORE DRIVE #1405 Address: Address: City-St-Zip: RIVIERA BEACH, FL 33404 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition DEANGELIS, JOHN Name: Name: 2316 HARRIER RUN Address: Address: NAPLES, FL 34105 City-St-Zip: City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete DIR Name: DIAMOND, DAVID Name: 6635 WILLOW PARK DRIVE Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34109

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: JASON BRIAN PD 07/03/2009