

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000036805

FILED
Apr 30, 2012
Secretary of State

Entity Name: DOLLARS & SENSE DEALERSHIP CONSULTING, INC.

Current Principal Place of Business:

900 SW PINE ISLAND RD
116
CAPE CORAL, FL 339911981 US

New Principal Place of Business:

900 SW PINE ISLAND RD
203
CAPE CORAL, FL 339911982 US

Current Mailing Address:

PO BOX 152118
CAPE CORAL, FL 339152118 US

New Mailing Address:

FEI Number: 27-2449841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOODMAN, ROBERT H
900 SW PINE ISLAND RD
116
CAPE CORAL, FL 339911981 US

Name and Address of New Registered Agent:

GOODMAN, ROBERT H
900 SW PINE ISLAND RD
203
CAPE CORAL, FL 339911982 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:

04/30/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: GOODMAN, ROBERT H
Address: 900 SW PINE ISLAND RD # 203
City-St-Zip: CAPE CORAL, FL 339911982 US

Title: SECR
Name: GOODMAN, ROBERT H
Address: 900 SW PINE ISLAND RD # 203
City-St-Zip: CAPE CORAL, FL 339911982 US

Title: TREA
Name: GOODMAN, ROBERT H
Address: 900 SW PINE ISLAND RD # 203
City-St-Zip: CAPE CORAL, FL 339911982 US

Title: DIRE
Name: GOODMAN, ROBERT H
Address: 900 SW PINE ISLAND RD # 203
City-St-Zip: CAPE CORAL, FL 339911982 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT H GOODMAN

PRES

04/30/2012

Electronic Signature of Signing Officer or Director

Date