2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 08, 2007 8:00 am Secretary of State

05-08-2007 90020 047 ***150 00

DOCUMENT # P18499				05-08-20	00/ 90020 04/ ***150.00	
ENTIRE CAR PROTECTION INCORPORATED						
Principal Place 1333 BURR I STE. 200 BURR RIDGE,	RIDGE PARKWAY	Mailing Address 1333 BURR RIDGE PARKWAY STE. 200 BURR RIDGE, IL 60521		1 1000000 1000 1000 1000 1000	1841 BURU BURU BURU BURU BURU BURU BURUK BURUKA IN TURU	
2. Principal Place of Business - No P.O. Box # 11310 Katherine's Closeing Suite, Apt. #, etc. Suite, Apt. #, etc.			therine's	02282007 Chg-P	CR2E034 (12/06)	
City & State	100	City & State		4. FEI Number	Applied For	
WOOd (country Country	Zip COL	intry ILA	36-2842424 5. Certificate of Status Desired	Not Applicable \$8.75 Additional	
(051	6. Name and Address of Current Re	egistered Agent		7. Name and Address of New	Fee Required	
Name						
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			Street Address (Street Address (P.O. Box Number is Not Acceptable)		
FLORIALI	ON, FE 33324					
			City		FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees						
10.	OFFICERS AND D	IRECTORS 11		ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD GARMAN, M. LAWRENCE 1333 BURR RIDGE PKWY STE 20 BURR RIDGE, IL 60521	NA DO ST	ILE IME REET ADDRESS TY-ST-ZIP		☐ Change ☐ Addition [†]	
THILE NAME STREET ADDRESS CHY-ST-ZIP	PD BETTENDORF, LAWRENCE 1333 BURR RIDGE PKWY STE 20 BURR RIDGE, IL 60521	NA ST	ILE CEC IME Bett REET ADDRESS IGNO TY-ST-ZIP (JOOK	endorf LAWRENCE KAthorines Clossi	ng Svite100	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MIEHL, PETER C 1333 BURR RIDGE PKWY STE 20 BURR RIDGE, IL 60521	NA SI	ILE MAE HET HET HOT ITY-ST-ZIP	Aty , Michael Ratherine's Clos	tuing Change Caddition sing Sixte 100	
TITLE			" " HILITY	NUMBER THE UP	S7	
NAME STREET ADDRESS CITY-ST-ZIP	V FEELEY, MICHAEL A 1333 BURR RIDGE PKWY STE 20 BURR RIDGE, IL 60521	Delete 16 NA	TLE USCI.	o Katherine's Ce Lidge II 1605	Change Addition Site 100	
NAME STREET ADDRESS	V FEELEY, MICHAEL A 1333 BURR RIDGE PKWY STE 20	Delete Iii N/	TLE IME REET ADDRESS TY-ST-ZIP WOO TLE	. <i></i>	osing Silte 100 Silte 100 Significance Addition Sissing Suite 100	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	V FEELEY, MICHAEL A 1333 BURR RIDGE PKWY STE 20 BURR RIDGE, IL 60521 V PIERONI, CHRISTOPHER G 1333 BURR RIDGE PKWY STE 20	Delete Delete Delete Delete Delete Delete Delete TI NA CI Delete TI NA CI SI OO SI CI SI OO SI SI OO SI	TILE IMME REET ADDRESS 112.1 TY-ST-ZIP WXX TILE IMME REET ADDRESS 112.1	o Katherine's Cr Lidge ID 608	Site 100 Change Addition Change Addition Change Addition	

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:___

SIGNATURE AND THE OF PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

1/27/07 630 754-42/2 Date Daytime Proce #