2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2004
Secretary of State

DOCUMENT# P96000041797

Entity Name: LAKE PLACID MOTORCAR, INC.

Current Principal Place of Business:

2920 ALT 27 SOUTH
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

2920 ALT 27 SOUTH
SEBRING, FL 33870 US

New Mailing Address:

FEI Number: 65-0679665 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAVES, DEBRA
124 LAGORI LN
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

GRAVES, DEBRA K
124 LAGONI LN
LAKE PLACID, FL 33852 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: DEBRA KEESEE GRAVES 01/06/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KEESEE, GRAVES D
Address: 124 LAGONI LN
City-St-Zip: LAKE PLACID, FL 33852

Title: VD ( ) Delete
Name: ALBRITTON, RUSSELL V III
Address: 2920 ALT 27 SOUTH
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GRAVES, DEBRA K
Address: 124 LAGONI LN
City-St-Zip: LAKE PLACID, FL 33852

Title: VD (X) Change ( ) Addition
Name: ALBRITTON, RUSSELL V III
Address: 1201 EDGEWATER POINT DR.
City-St-Zip: SEBRING, FL 33870

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEBRA KEESEE GRAVES PD 01/06/2004
Electronic Signature of Signing Officer or Director Date