

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000101046

FILED  
Apr 16, 2008  
Secretary of State

Entity Name: CARL'S ELITE AUTO REPAIR INC.

**Current Principal Place of Business:**

560 S. RONALD REAGAN BLVD.  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

560 S. RONALD REAGAN BLVD.  
LONGWOOD, FL 32750

**New Mailing Address:**

FEI Number: 59-3418328      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DUNN, COREY  
560 S. RONALD REAGAN BLVD.  
LONGWOOD, FL 32750    US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: HAGAMAN, CARL  
Address: 560 S. RONALD REAGAN BLVD.  
City-St-Zip: LONGWOOD, FL 32750

Title: P      ( ) Delete  
Name: DUNN, COREY  
Address: 560 S RONALD REAGAN BLVD.  
City-St-Zip: LONGWOOD, FL 3275

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: DUNN, COREY  
Address: 560 S. RONALD REAGAN BLVD.  
City-St-Zip: LONGWOOD, FL 32750

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP      ( ) Change (X) Addition  
Name: HAGAMAN, CARL  
Address: 560 S. RONALD REAGAN BLVD  
City-St-Zip: LONGWOOD, FL 32750

Title: SEC      ( ) Change (X) Addition  
Name: HAGAMAN, CARL  
Address: 560 S. RONALD REAGAN BLVD  
City-St-Zip: LONGWOOD, FL 32750

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: COREY DUNN

D

04/16/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date