

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000048053

**FILED**  
**Feb 10, 2009**  
**Secretary of State**

**Entity Name:** ANY TIME AUTO, INC.

**Current Principal Place of Business:**

1234 EAST ROSE STREET  
LAKELAND, FL 33801

**New Principal Place of Business:**

5503 HWY 98 SOUTH  
HIGHLAND CITY, FL 33813

**Current Mailing Address:**

1234 EAST ROSE STREET  
LAKELAND, FL 33801

**New Mailing Address:**

6825 CREWS LAKE ROAD  
LAKELAND, FL 33813

**FEI Number:** 59-3513738

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANDOVAL, EDWIN  
1234 EAST ROSE STREET  
LAKELAND, FL 33801 US

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

SANDOVAL, EDWIN  
6825 CREWS LAKE ROAD  
LAKELAND, FL 33813 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: EDWIN SANDOVAL

02/10/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: SANDOVAL, EDWIN  
Address: 1234 EAST ROSE STREET  
City-St-Zip: LAKELAND, FL 33801

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

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

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: EDWIN SANDOVAL

DP

02/10/2009

Electronic Signature of Signing Officer or Director

Date