2005 FOR PROFIT CORPORATION

FILED Sep 06, 2005 8:00 am Secretary of State ANNUAL REPORT

09-06-2005 90138 020 ***550.00 **DOCUMENT # P98000058158** AUTOCOUNT, INC. 50065181 Principal Place of Business Mailing Address 1211 SEMORAN BLVD STE 101 C/O EXPERIAN, 475 ANTON BLVD CASSELBERRY, FL 32707 COSTA MESA, CA 92626 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07052005 CR2E034 (10/03) Cha-P City & State City & State Applied For 4. FEI Number 59-3522237 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Due by September 7, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE ☐ Change Addition NAME STARR, ROBERT A SR. NAME See Attached STREET ADORESS 4713 RIVERTON DR. STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32817 CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME TROYER, D.W. NAME STREET ADDRESS 15502 THORNHURST CT STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33647 CITY-ST-ZIP IIILE Detete TITLE ☐ Change ☐ Addition TROYER, RUTH NAME NAME STREET ADDRESS 15502 THORNHURST CT STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33647 CITY-ST-ZIP Delete TITLE DILE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP ПΠЕ □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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.



 r_{\perp}

Year 2005

Office Chairman Director Director	Name Don Robert Robert Nelson Paul Brooks	Address 475 Anton Blvd. Costa Mesa, CA 92626 475 Anton Blvd. Costa Mesa, CA 92626 475 Anton Blvd. Costa Mesa, CA 92626
Office	Name	Address
President	Robert Starr	475 Anton Blvd. Costa Mesa, CA 92626
Vice President	Paul Brooks	475 Anton Blvd. Costa Mesa, CA 92626
Secretary	Scott Leslie	475 Anton Blvd. Costa Mesa, CA 92626
Asst Secretary	Darryl Gibson	475 Anton Blvd. Costa Mesa, CA 92626
Treasurer	Mark Pepper	475 Anton Blvd. Costa Mesa, CA 92626
Asst. Treasurer	Gorety Geiger	475 Anton Blvd. Costa Mesa, CA 92626

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