2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000084075

FILED Apr 05, 2007 Secretary of State

Entity Name: SUPERIOR GOLF CART RENTAL SALES AND SERVICE, INC.

Current Principal Place of Business: New Principal Place of Business: 1248 S. MILITARY TR. WEST PALM BEACH, FL 33415 **Current Mailing Address: New Mailing Address:** 1248 S. MILITARY TR. WEST PALM BEACH, FL 33415 FEI Number: 65-0878557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: VANDERWALL, MICHELLE FRASCOIA, SCOTT 6801 LAKE WORTH RD 1089 ISLAND MANOR DR. WEST PALM BEACH, FL 33413 STE 124 US LAKE WORTH, FL 33467 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: SCOTT FRASCOIA 04/05/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FRASCOIA, SCOTT Name: Name: 1089 ISLAND MANOR DR Address: Address: City-St-Zip: WEST PALM BEACH, FL 33413 City-St-Zip: Title: Title: VP,S () Delete (X) Change () Addition FRASCOIA, SUNDAY Name: Name: FRASCOIA, SUNDAY 1089 ISLAND MANOR DR 1089 ISLAND MANOR DR Address: Address: WEST PALM BEACH, FL 33413 WEST PALM BEACH, FL 33413 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition FRASCOIA, TERESA Name: Name: 6308 EDWARD DR Address: Address: City-St-Zip: CLINTON, MD 20735 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SUNDAY FRASCOIA VP 04/05/2007