

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000008617

FILED  
Apr 09, 2007  
Secretary of State

Entity Name: CRYSTAL MOTOR CAR COMPANY, INC.

## Current Principal Place of Business:

1035 SOUTH SUNCOAST BLVD.  
HOMOSASSA, FL 34448

## New Principal Place of Business:

## Current Mailing Address:

1035 SOUTH SUNCOAST BLVD.  
HOMOSASSA, FL 34448

## New Mailing Address:

FEI Number: 59-3554138

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BEHRENFELD, CRAIG E ESQ.  
601 BAYSHORE BLVD.  
SUITE 700  
TAMPA, FL 33606 US

## Name and Address of New Registered Agent:

HUDOCK, LESLIE WAGER ESQ.  
601 BAYSHORE BLVD.  
SUITE 700  
TAMPA, FL 33606 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: LESLIE WAGER HUDOCK

04/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LAMB, STEVEN D  
Address: 900 SW KINGSBAY DR  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D ( ) Delete  
Name: SMITH, KENNEDY  
Address: 9775 W WYNN CT  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D ( ) Delete  
Name: LAMB, JEWELL  
Address: 900 SW KINGSBAY DR  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D ( ) Delete  
Name: SMITH, CAROL  
Address: 9775 W WYNN CT  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D ( ) Delete  
Name: FARRELL, TIM  
Address: 100 SECOND AVE S STE 600  
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: D ( ) Delete  
Name: UITERWYK, STEVEN A  
Address: 209 S LAKE PARKER AVE  
City-St-Zip: LAKELAND, FL 33801

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: STEVEN D. LAMB

D

04/09/2007

Electronic Signature of Signing Officer or Director

Date