2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# S62415

Entity Name: OWL AUTO FINANCE CO.

Current Principal Place of Business:

2315 CURRY FORD RD
ORLANDO, FL 32806

New Principal Place of Business:

2315 CURRY FORD RD
ORLANDO, FL 32806 US

Current Mailing Address:

2315 CURRY FORD RD
ORLANDO, FL 32806

New Mailing Address:

P.O. BOX 1701
ORLANDO, FL 32802 US

FEI Number: 59-3070437 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COTTON, TOM M
2315 CURRY FORD ROAD
ORLANDO, FL 32806 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: COTTON, THOMAS M
Address: 1107 ARUBA DR
City-St-Zip: ORLANDO, FL 32806

Title: S ( ) Delete
Name: WILKOSZ, DAVID
Address: 2334 GREEN BUSH COURT
City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete
Name: HAGAN, STEVEN M
Address: 152 MAGNOLIA PARK TRAIL
City-St-Zip: SANFORD, FL 32773

Title: P ( ) Delete
Name: COTTON, JENNIE
Address: 717 EUCLID AVE
City-St-Zip: ORLANDO, FL 32801

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:

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: DAVID L WILKOSZ S 03/10/2009
Electronic Signature of Signing Officer or Director Date