2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V18490

Entity Name: AUTOMOTION TECHNOLOGIES, INC.

FILED Apr 24, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16 MEADOW TERRACE 488 SW MEADOW TERRACE LAKE CITY, FL 32024 LAKE CITY, FL 32024

Current Mailing Address: New Mailing Address:

PO BOX 2604

LAKE CITY, FL 32056 US

FEI Number: 59-3110720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BECKER, WILLIAM C MR. PO BOX 2604 LAKE CITY, FL 32056

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS () Delete Title: **PRFS** (X) Change () Addition BECKER, WILLIAM C BECKER, WILLIAM C Name: Name: 16 MEADOW TERRACE 488 SW MEADOW TERRACE Address: Address: City-St-Zip:

LAKE CITY, FL 32024 City-St-Zip: LAKE CITY, FL 32024

Title: VΡ Title: VΡ (X) Change () Addition () Delete Name: NEWKIRK, DON A Name: NEWKIRK, DON A

4534-40TH ST S 510 INNSBROOK ESTATES Address: Address: ST PETERSBURG, FL INNSBROOK, MO 63390 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: SEC () Delete SEC

BECKER, KIM M BECKER, KIM M Name: Name:

16 MEADOW TERRACE 488 SW MEADOW TERRACE Address: Address: City-St-Zip: LAKE CITY, FL 32056 City-St-Zip: LAKE CITY, FL 32024

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Ρ SIGNATURE: WM C. BECKER 04/24/2005