


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 18, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 234898**

1. Entity Name  
**GENERAL GMC TRUCK SALES AND SERVICE, INC.**



Principal Place of Business      Mailing Address  
**360 SOUTH MILITARY TRAIL**      **360 SOUTH MILITARY TRAIL**  
**WEST PALM BEACH, FL 33415-2895 US**      **WEST PALM BEACH, FL 33415-2895 US**



01052005      No Chg-P      CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
**59-0904476**      Not Applicable

5. Certificate of Status Desired      ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**LEONARD, DE SANTI**  
**14022 GREEN TREE TRACE**  
**WEST PALM BEACH, FL 33414**

**DO NOT WRITE  
IN THIS SPACE**

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: *Leonard De Santi*

**1-18-2005**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renouncing)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing      ☐ **\$5.00 May Be**  
Trust Fund Contribution.      Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE      PT  
NAME      DESANTI, M  
STREET ADDRESS      412 MUIRFIELD DR  
CITY-ST-ZIP      ATLANTIS, FL

TITLE      VS  
NAME      DESANTI, LEONARD  
STREET ADDRESS      14022 GREENTREE TRACE  
CITY-ST-ZIP      WELLINGTON, FL 33414

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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01/20/05-80046-014 158.75

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

**1/13/05**