

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 235310

Entity Name: PLANT CITY MOTORS, INC.

FILED
Mar 16, 2006
Secretary of State

Current Principal Place of Business:

502 E. PARK ROAD
PLANT CITY, FL 33563

New Principal Place of Business:

Current Mailing Address:

502 E. PARK ROAD
PLANT CITY, FL 33563

New Mailing Address:

FEI Number: 59-0917334

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILLETTE, JOHN M
502 E. PARK ROAD
PLANT CITY, FL 33563 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: PD () Delete
Name: GILLETTE, JOHN M
Address: 502 E. PARK ROAD
City-St-Zip: PLANT CITY, FL 33563

Title: STD () Delete
Name: ARTHUR, THOMAS D
Address: 1700 MACDILL AVE. SUITE 340
City-St-Zip: TAMPA, FL 336295218

Title: AS () Delete
Name: GILLETTE, DOROTHY
Address: 4505 BEACH PARK DRIVE
City-St-Zip: TAMPA, FL 33609

Title: AS () Delete
Name: PERIGO, SHARON
Address: 502 E. PARK ROAD
City-St-Zip: PLANT CITY, FL 33563

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 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: SHARON PERIGO

AS

03/16/2006

Electronic Signature of Signing Officer or Director

_____ Date