

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 240518

Entity Name: BILL CURRIE FORD, INC.

FILED
Jul 10, 2008
Secretary of State

Current Principal Place of Business:

5815 N. DALE MABRY HWY.
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

5815 N. DALE MABRY HWY.
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-0910014 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CURRIE III, WILMER E
5815 N.DALE MABRY
TAMPA, FL 33614 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CURRIE III, WILMER E
Address: 5815 N.DALE MABRY
City-St-Zip: TAMPA, FL

Title: VP () Delete
Name: CURRIE BELLOMO, JENNIFER L
Address: 5815 N. DALE MABRY
City-St-Zip: TAMPA, FL 33614

Title: VP () Delete
Name: CURRIE IV, WILMER E
Address: 5815 N. DALE MABRY
City-St-Zip: TAMPA, FL 33614

Title: () Delete
Name:
Address:
City-St-Zip:

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: ST () Change (X) Addition
Name: DIAZ, ALBERTO
Address: 5815 N DALE MABRY
City-St-Zip: TAMPA, FL 33614

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: ALBERTO DIAZ

ST

07/10/2008

Electronic Signature of Signing Officer or Director

_____ Date