


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # 331478		
1. Entity Name WES HANEY CHEVROLET, INC.		
Principal Place of Business 816 EAST HOWARD STREET LIVE OAK, FL 32064	Mailing Address PO BOX 878 LIVE OAK, FL 32064 US	



01042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1212783	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HANEY, DAVID W JR.
816 E HOWARD ST
LIVE OAK, FL 32064**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HANEY, DAVID W JR PO BOX 878 LIVE OAK, FL 32064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SULLIVAN, JULIE A 423 WEST BOURNE ST LA JOLLA, CA 92037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SWANN, EILEEN PO BOX 878 LIVE OAK, FL 32064
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Eileen Swann* **Eileen SWANN** **1-4-08** **386-362-2976**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #