


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2008 08:00 AM
Secretary of State

DOCUMENT # 400306 1. Entity Name THOMAS CHEVROLET BUICK PONTIAC INC.	
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Principal Place of Business 2128 HWY. 19 S. PERRY, FL 32348 US	Mailing Address P.O. BOX 415 PERRY, FL 32348 US
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03042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 72-0401210	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent THOMAS, LEWIS H 2128 HWY 19 SO PERRY, FL 32348	<p style="font-size: 24px; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	P
NAME	THOMAS, MARY JO
STREET ADDRESS	504 PLANTATION RD./ P.O. BOX 415
CITY-ST-ZIP	PERRY, FL 32348
TITLE	VP
NAME	BRANTLEY, ALAN R.
STREET ADDRESS	207 STATE STREET
CITY-ST-ZIP	PERRY, FL
TITLE	VP
NAME	THOMAS, LEWIS CAL
STREET ADDRESS	306 GLENRIDGE ROAD
CITY-ST-ZIP	PERRY, FL 32348
TITLE	ST
NAME	TORNILLO, MERRIO
STREET ADDRESS	3148 HAWKS LANDING
CITY-ST-ZIP	TALLAHASSEE, FL 32309
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/09/08-80079-017 150.00

DO NOT WRITE
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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 Mary Jo Thomas Pres Mary Jo Thomas 042408 850-584-6221
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone