

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 510786

FILED
Dec 20, 2008
Secretary of State**Entity Name:** CENTRAL FLORIDA BUS & AUTO SALES, INC**Current Principal Place of Business:**102 BURBANK AVE
LAKELAND, FL 33801**New Principal Place of Business:****Current Mailing Address:**2101 EAST MAIN ST.
LAKELAND, FL 33801**New Mailing Address:****FEI Number:** 26-3237467**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SILVER, WYNN
2101 EAST MAIN ST.
LAKELAND, FL 33801 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:** CEO () Delete
Name: WYNN, SILVER
Address: 2101 E. MAIN ST.
City-St-Zip: LAKELAND FL,**Title:** P () Delete
Name: SILVER, JOHN W
Address: 2101 E. MAIN ST.
City-St-Zip: LAKE LAND, FL 00000,**Title:** S () Delete
Name: SILVER, LYNNE
Address: 2101 E MAIN STREET
City-St-Zip: LAKELAND, FL**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:

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: LYNNE SILVER

S

12/20/2008

Electronic Signature of Signing Officer or Director_____
Date