


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2006 08:00 AM
Secretary of State

DOCUMENT # 533897	
1. Entity Name DANNY LEN BUICK-PONTIAC-GMC TRUCKS, INC.	

Principal Place of Business 17605 US HWY 441 MT. DORA, FL 32757 US	Mailing Address 17605 US HIGHWAY 441 MOUNT DORA, FL 32757-6716 US
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DO NOT WRITE IN THIS SPACE



02142006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1745310	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 STONE, LEWIS W 4850 N HWY 19 A MT DORA, FL 32757
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**DO NOT WRITE
IN THIS SPACE**

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 reappointing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LEN BRUCE A 22527 LAKE SENEKA RD EUSTIS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEN, DANIEL J 11 CROOKED LKE ESTATE EUSTIS, FLORIDA 00000.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LEN, RODNEY J PO BOX 350377 GRAND ISLAND, FL 30735
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03/23/06-80037-019 150.00

**DO NOT WRITE
IN THIS SPACE**

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:  **3-6-06 352-588-150**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daying Page 2