

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 588219

FILED  
Mar 30, 2007  
Secretary of State

**Entity Name:** NORTHSIDE TIRE AND FOUR WHEEL DRIVE, INCORPORATED

**Current Principal Place of Business:**

513 W. WATERS AVENUE  
TAMPA, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

513 W. WATERS AVENUE  
TAMPA, FL 33604

**New Mailing Address:**

**FEI Number:** 59-2016157

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPOKAS, ADOLPH A  
513 W WATERS AVE  
TAMPA, FL 33604 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SPOKAS, ADOLPH A., JR.  
Address: 19801 DEER HOLLOW LANE  
City-St-Zip: LUTZ, FL 33548 US

Title: SD ( ) Delete  
Name: SPOKAS, CYNTHIA F  
Address: 19801 DEER HOLLOW LANE  
City-St-Zip: LUTZ, FL 33548 US

Title: V ( ) Delete  
Name: ASBEL, WENDELL B  
Address: 4328 LANE ROAD  
City-St-Zip: ZEPHRYHILLS, FL 33541

Title: T ( ) Delete  
Name: SPOKAS, ADOLPH A III  
Address: 506 SE 2ND AVENUE  
City-St-Zip: LUTZ, FL 33549 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SPOKAS, ADOLPH A JR.  
Address: 19801 DEER HOLLOW LANE  
City-St-Zip: LUTZ, FL 33548 US

Title: STD (X) Change ( ) Addition  
Name: SPOKAS, CYNTHIA F  
Address: 19801 DEER HOLLOW LANE  
City-St-Zip: LUTZ, FL 33548 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: SPOKAS, ADOLPH A III  
Address: 506 SE 2ND AVENUE  
City-St-Zip: LUTZ, FL 33549 US

I hereby certify that the information supplied with this filing does not qualify for the 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:** ADOLPH A. SPOKAS, JR

PD

03/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date