2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000232

LILES, LOUIS É

555 IH 35 SOUTH

NEW BRAUNFELS, TX 78130

Name:

Address:

City-St-Zip:

FILED May 17, 2006 Secretary of State

Entity Nar	ne: RUSH TR	UCK CENTERS OF F	LORIDA, INC.				
Current P	rincipal Place	of Business:	New Pri	New Principal Place of Business:			
P.O. BOX S SAN ANTO	34630 DNIO, TX 7826	54630					
Current M	ailing Addres	s:	New Ma	New Mailing Address:			
555 IH 35 S NEW BRA	SOUTH UNFELS, TX	78130					
FEI Number:	06-1672108	FEI Number Applied For	r() FEI Number Not A	oplicable ()	Certificate of Status Desired (X)	I	
Name and	Address of C	urrent Registered Ag	ent: Name a	Name and Address of New Registered Agent:			
1333 NOR	CORPORATE TH DUVAL ST SSEE, FL 3230	SERVICES, INC. 03 US					
	named entity s of Florida.	submits this statement f	or the purpose of changin	g its registered	office or registered agent, or be	oth,	
SIGNATUR	RE:						
	Electron	ic Signature of Registe	red Agent	Date			
		3(2)(b), F.S., the corporation Trust Fund Contribution	on did not receive the prior no	tice.			
	S AND DIREC	•	` '	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	C () RUSH, W. MAR 555 IH 35 SOUT NEW BRAUNFE	TH .	Title: Name: Address: City-St-Zip		() Change() Addition		
Title: Name: Address: City-St-Zip:	P () RUSH, W.M. 555 IH 35 SOUT NEW BRAUNFE		Title: Name: Address: City-St-Zip		() Change() Addition		
Title: Name: Address: City-St-Zip:	VP () NAEGELIN, MAI 555 IH 35 SOUT NEW BRAUNFE	TH .	Title: Name: Address: City-St-Zip	NAEGELIN, N 555 IH 35 SO			
Title: Name: Address: City-St-Zip:	VPST () RUSH, ROBIN M 555 IH 35 SOUT NEW BRAUNFE	Ή	Title: Name: Address: City-St-Zir	ANDERSON, 555 IH 35 SO			
Title:	AS ()	Delete	Title:	(() Change() Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARTIN A. NAEGELIN, JR **VPST** 05/17/2006