

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # F03000002511

1. Entity Name
GENERAL TIRE INTERNATIONAL COMPANY



Principal Place of Business
**1800 CONTINENTAL BLVD.
CHARLOTTE, NC 28273**

Mailing Address
**1800 CONTINENTAL BLVD.
CHARLOTTE, NC 28273**



01122007 No Chg-P CR2E034 (11/05)

4. FEI Number
34-0449148

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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
**CP
ROGERS, TIMOTHY
1800 CONTINENTAL BLVD.
CHARLOTTE, NC 28273**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
JURCH, GEORGE R
1800 CONTINENTAL BLVD.
CHARLOTTE, NC 28273**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
WORTHINGTON, MICHAEL T
1800 CONTINENTAL BLVD.
CHARLOTTE, NC 28273**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**AT
FRANKS, BERT
1800 CONTINENTAL BOULEVARD
CHARLOTTE, NC 28273**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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02/01/07-80059-024 150.00

**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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bert Franks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/23/07
Date

704 583 1875
Daytime Phone #