2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 20, 2004 08:00 AM
Secretary of State

DOCUMENT # F31646

1. Entity Name
CENTRAL AUTO AND INDUSTRIAL SUPPLY, INC.

Principal Place of Business	Mailing Address
208 HIGHWAY 29 SOUTH CANTONMENT, FL 32533 US	208 HIGHWAY 29 SOUTH CANTONMENT, FL 32533 US

DO NOT WRITE IN THIS SPACE

08162004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2133163

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

EDDINS, WILLIAM
900 N. PALAFOX ST.
PENSACOLA, FL 32501

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 _____ Date

FILE NOW!!! FEE IS $550.00
Due by September 8, 2004

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HELMS, BILL W.
STREET ADDRESS	3451 E. KINGSFIELD RD.
CITY ST ZIP	PENSACOLA, FL
TITLE	STD
NAME	HELMS, ANN O
STREET ADDRESS	3451 E. KINGSFIELD RD.
CITY ST ZIP	PENSACOLA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

U00000170481
08/20/04-80002-013 550.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Billy W. Helms 8/18/04 850-968-2887

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number