

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90310 029 ***150.00

DOCUMENT # F94 000003590	
1. Entity Name Ragan Tire and Retread Company dba RDH Tire & Retread Co.	

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2. Principal Place of Business North Carolina 1315 Red		3. Mailing Address P.O. Box 187	
Suite, Apt. #, etc. N/A		Suite, Apt. #, etc. N/A	
City & State Cleveland NC		City & State NC	
Zip 27013	Country Roman	Zip 27013	Country Roman

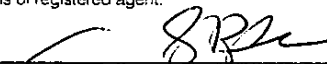
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4. FEI Number 56-1504484	Applied For ☐ No: Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

7. Name and Address of Current Registered Agent	
Name Mr. John M. Trudell, Jr.	
Street Address (P.O. Box Number is Not Acceptable) 3508 Jennie Jewel Place	
City Orlando	FL Zip Code 32806

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 4-18-05
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January 1 - May 1 Fee is \$150.00 After May 1 Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bradley E. Rasaw, Jr. President P.O. Box 187 Cleveland, NC 27013	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Homer Hustings Vice President P.O. Box 187 Cleveland NC 27013	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

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 on an attachment with an address, with all other I am empowered.	SIGNATURE: 	DATE 4-18-05	DAYTIME PHONE 800 228 4730
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CR2E034B (12/02)