FILED 2004 FOR PROFIT CORPORATION Jan 16, 2004 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # F95000002853 1. Entity Name SOUTHERN TIRE COMPANY OF GEORGIA Mailing Address Principal Place of Business POST OFFICE BOX 1627 290-B HARPER BLVD MOULTRIE, GA 31768 MOULTRIE, GA 31776 US 01052004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 58-1270437 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COOPER, JEFFREY B DO NOT WRITE 9137 MORNINGTON DRIVE JACKSONVILLE, FL 32257 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. \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE COOPER, HUGH D NAME 931 JOHN BUCK MCCOY ROAD STREET ADDRESS CITY-ST-ZIP MOULTRIE, GA 31768 -000000006706 TITLE 01/16/04-80045-008 150.00 COOPER, WILLIS E NAME STREET ADDRESS RT 2 BOX 267 CITY-ST-7IP QUITMAN, GA ST TITLE COOPER, ROBERT L NAME STREET ADDRESS 7427 GA HWY 133 SOUTH DO NOT WRITE CITY-ST-ZIP MOULTRIE, GA 31768 IN THIS SPACE 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 type liver or further employee 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 attagriment witty an accress, with an officer powered.

TITLE

STREET ADDRESS CITY - ST - ZIP

WATURE AND TYPED OR PHINTED HAMING OFFICER OR DIRECTOR

ale Daytime Phone