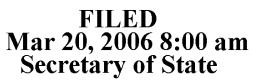
## 2006 FOR PROFIT CORPORATION ANNUAL REPORT



Daytime Phone #

DOCUMENT # F9800001360  1. Entity Name PANHANDLE AUTOMOTIVE, INC.					03-20-2006 90004 005 ***150.00					
Principal Place of Business Mailing Address 641 W. 15TH STREET 641 W. 15TH STREET PANAMA CITY, FL 32401 PANAMA CITY, FL 32401										
Principal Place of Business     3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01132006	Chg-P	CR2E0	34 (11/05)		
City & State		City & State			4. FEI Number 59-3500308				Applied For Not Applicable	
Zip	Country	Zíp	Country		5. Certificate	of Status Desired		\$8.75 Add Fee Require		
	6. Name and Address of Curre	N	7. Name and Address of New Registered Agent Name							
1200 SOU	ORATION SYSTEM TH PINE ISLAND ROAD ION, FL 33324		Street Address		(P.O. Box Numb	er is Not Acceptable	)			
			City				FL	Zip Cod	e	
	named entity submits this statement lons of registered agent.	for the purpose of changing its	s registered o	office or register	red agent, or bo	th, in the State of Fig	rida. I am f	amiliar with,	and accept	
SIGNATURE										
	Signature, typed or printed name of registered ag			ent signature required			DATE			
	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$55	9. Election Campi O.00 Trust Fund Cor		g \$5. □ Add	.00 May Be led to Fees					
10.		ND DIRECTORS	11.		ADDITIONS,	CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	P DAGGS, LEON 641 W. 15TH STREET PANAMA CITY, FL	☐ Deleta	TITLE NAME STREET AL CITY-ST-					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GAINER, GEORGE B 641 W. 15TH ST PANAMA CITY, FL 32401	☐ Detote	TITLE NAME STREET AI CITY-ST-					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GREER, BRACK 641 W. 15TH ST PANANMA CITY, FL 32401	☐ Delete	TITLE NAME STREET AL CITY-ST-	- 1				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HOTT, TERRI 641 W 15TH ST PANAMA CITY, FL 32401	<b>□</b> Delete	TITLE NAME - STREET AI CITY-ST-	DORESS C41	RY JO D W. 15th	URMAN ST. M 32401		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delate	TITLE NAME STREET AG CITY-ST-	DORESS	· · · · · · · · · · · · · · · · · · ·			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A CITY-ST-			, <del>11 - 9</del>		Change	☐ Addition	
l of the cor	certify that the information supplied of on this report or supplemental report poration or the receiver or trustee er, or on an attachment with an address	npowered to execute this repor	t as required	otions contained shall have the by Chapter 607	7, Florida Statuti	9, Florida Statutes. I ct as if made under es; and that my nam	further certi- path; that I a e appears in	ify that the in m an officer n Block 10 o	nformation or director r Block 11 if	