

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G19947

FILED
Apr 11, 2011
Secretary of State

Entity Name: TROPICAL AUTOMOTIVE, INC. OF ST. AUGUSTINE

Current Principal Place of Business:

% B. W. FLETCHER, JR.
27 MCMILLAN ST.
SAINT AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

% B. W. FLETCHER, JR.
27 MCMILLAN ST.
ST. AUGUSTINE, FL 32095 US

New Mailing Address:

FEI Number: 59-2244306 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FLETCHER, B. W., JR.
RT 4, BOX 362-B
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP
Name: WOODS, DAVID B
Address: 40 SARAGOSSA ST
City-St-Zip: ST AUGUSTINE, FL

Title: D
Name: WOODS, ALICE O.
Address: 40 SARAGOSSA ST
City-St-Zip: ST AUGUSTINE, FL

Title: D
Name: WOODS, JAMES A
Address: 305 3RD ST.
City-St-Zip: SAINT AUGUSTINE, FL 32084

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JAMES WOODS

D

04/11/2011

Electronic Signature of Signing Officer or Director

_____ Date