

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G50680

FILED
Jan 15, 2008
Secretary of State

Entity Name: RICHARD'S AUTOMOTIVE SERVICES, INC.

Current Principal Place of Business:

% RICHARD WILSON
1882 DUNN AVE.
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

% RICHARD WILSON
1882 DUNN AVE.
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 59-2310109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, RICHARD
1882 DUNN AVE.
JACKSONVILLE, FL 32218 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CSTD () Delete
Name: WILSON, RICHARD,
Address: 1882 DUNN AVE.
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: WILSON, RICHARD,
Address: 1882 DUNN AVE.
City-St-Zip: JACKSONVILLE, FL

Title: PD () Delete
Name: WILSON, BRIAN
Address: 1882 DUNN AVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: WHITECOTTEN, TIFFANY
Address: 1882 DUNN AVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: WILSON, RYAN
Address: 1882 DUNN AVE
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRIAN WILSON

PD

01/15/2008

Electronic Signature of Signing Officer or Director

_____ Date