

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # G61026

1. Entity Name
FISHER AUCTION CO., INC.



Principal Place of Business
**619 EAST ATLANTIC BLVD.
POMPANO BCH, FL 33060-6343 US**

Mailing Address
**619 EAST ATLANTIC BLVD.
POMPANO BCH, FL 33060-6343 US**

FILED

06 SEP -1 AM 10: 28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08212006

Chg-P

CR2E034 (11/05)

4. FEI Number
59-2342559

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FISHER LAMAR P.
619 EAST ATLANTIC BLVD.
POMPANO BCH, FL 33060-6343**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

100079522281
06/06--01036--020 **61.25

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRES
FISHER, LAMAR P.
619 EAST ATLANTIC BLVD.
POMPANO BCH., FL 330606343** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT/ SECRETARY
FISHER, LAMAR
619 EAST ATLANTICE BLVD
POMPANO BEACH, FL 33060-6343** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CH
FISHER JR., LOUIS B CHAIRMAN
619 EAST ATLANTIC BLVD.
POMPANO BCH., FL 330606343** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EXECUTIVE VICE - PRESIDENT
DOUG DENNISON
619 EAST ATLANTIC BLVD.
POMPANO BEACH, FL 33060-6343** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EXECUTIVE VICE - PRESIDENT
FRANCIS SANTOS
619 EAST ATLANTIC BLVD
POMPANO BEACH, FL 33060-6343** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/30/06

954.942.0917