2007 FOR PROFIT CORPORATION

Jan 25, 2007 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # G73635 01-25-2007 90035 029 ***150.00 SPEEDY LUBE & OIL, INC. OF PENSACOLA Principal Place of Business Mailing Address DUUUV3 2~ 3711 SCENIC HWY **3711 SCENIC HWY** PENSACOLA, FL 32504 PENSACOLA, FL 32504 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Ant # etc. Suite, Apt. #, etc. 01052007 CR2E034 (12/06) City & State City & State Applied For 4 FELNumber 59-2342664 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SUMLIN, R. WAYNE 3711 SCENIC HWY Street Address (P.O. Box Number is Not Acceptable) PENSACOLA, FL 32504 City 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition SUMLIN, R WAYNE NAME NAME 3711 SCENIC HWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32504 CITY-ST-ZIP TITLE ☐ Delete Director, Secretary, Trassing TITLE Addition SUMLIN, JUDY L NAME Sumlin Judy STREET ADDRESS 3711 SCENIC HWY STREET ADDRESS 3711 SURICE HW CITY-ST-ZIP PENSACOLA, FL 32504 CHY-ST-7IP TITLE DT Delete TITLE ☐ Addition NAME NEWSOM, EVA S NAME STREET ADDRESS 2384 EXETER CIRCLE STREET ADDRESS CITY-ST-ZIP SANDY, UT 84093 CHY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST ZIP TITLE ☐ Delete THUE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY \$1 ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME

FILED

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.

STREET ADDRESS

CHY ST-ZIP

STREET ADDRESS

CLTY - ST - ZIP

Wayne Sumlin TYPED OR PRINTED NAME OF SIGNING OFFICER OR D