

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J08162

FILED
Feb 05, 2008
Secretary of State

Entity Name: PARKER'S TIRE SERVICE & AUTO CARE, INC.

Current Principal Place of Business:

% JOE INGRAO
3000 N.W. PINE AVE.
OCALA, FL 34475

New Principal Place of Business:

Current Mailing Address:

% JOE INGRAO
3000 N.W. PINE AVE.
OCALA, FL 34475

New Mailing Address:

FEI Number: 59-2654431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, KEVIN
3000 N.W. PINE AVE.
OCALA, FL 34475 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: P () Delete
Name: WOOD, KEVIN
Address: 3000 N.W. PINE AVE.
City-St-Zip: OCALA, FL 34475

Title: S () Delete
Name: WOOD, KEVIN
Address: 3000 NW PINE AVE
City-St-Zip: OCALA, FL 34475

Title: T () Delete
Name: WOOD, KEVIN
Address: 3000 NW PINE AVE
City-St-Zip: OCALA, FL 34475

Title: () Delete
Name:
Address:
City-St-Zip:

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: VP () Change (X) Addition
Name: INGRAO, JOSEPH
Address: 3000 N W PINE AVE
City-St-Zip: OCALA, FL 34475-261 US

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: KEVIN WOOD

P

02/05/2008

Electronic Signature of Signing Officer or Director

Date