

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 19, 2005 8:00 am**  
**Secretary of State**

04-19-2005 90388 002 \*\*\*150.00

DOCUMENT # J10892

1. Entity Name

STRETCHER LIMO, INC.



Principal Place of Business

6030 MASSACHUSETTS AVE  
NEW PORT RICHEY FL 34653-2524  
US

Mailing Address

6030 MASSACHUSETTS AVE  
NEW PORT RICHEY FL 34653-2524  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2680050

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SPIVEY, JO LYN  
6030 MASSACHUSETTS AVE  
NEW PORT RICHEY FL 34653

7. Name and Address of New Registered Agent

Name Smith, Dennis

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

6030 Massachusetts Ave

City New Port Richey

FL

Zip Code 34653

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Dennis R. Smith

4-13-05

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete  
NAME SPIVEY, JO LYN  
STREET ADDRESS 16003 CHASTAIN RD  
CITY-ST-ZIP ODESSA FL 33556

TITLE D ☐ Delete  
NAME SMITH, DENNIS  
STREET ADDRESS 4740 DUNEY ST  
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE D ☐ Delete  
NAME SMITH, DOLORES  
STREET ADDRESS 4525 GLEN HOLLOW  
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE D ☐ Delete  
NAME SMITH, DOUGLAS R  
STREET ADDRESS 6177 MAPLEWOOD  
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE D ☒ Delete  
NAME SMITH, DAVID J.  
STREET ADDRESS 9338 ELIDA RD  
CITY-ST-ZIP SPRING HILL FL 34608

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Dennis R. Smith

Dennis R. Smith

4-13-05

727-845-4454

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #