2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L06196

Entity Name: ALLIED TIRE SALES, INC.

FILED Jan 22, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7001 LAKE ELLENOR DR STE 150 ORLANDO, FL 328095792 **New Mailing Address: Current Mailing Address:** 1144 EAST MARKET ST. 1144 EAST MARKET ST. DEPT. 616 AKRON, OH 443160001 AKRON, OH 443160001 FEI Number: 59-2967230 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition STALLINGS, PAUL A Name: Name: 1144 E MARKET STREET Address: Address: City-St-Zip: AKRON, OH 44316 US City-St-Zip: VPT Title: Title: () Delete (X) Change () Addition Name: BERGERON, STEPHANIE W Name: WELLS, DARREN R 1144 EAST MARKET STREET 1144 EAST MARKET STREET Address: Address: AKRON, OH 44316 US AKRON, OH 44316 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition NUGENT, BYKE R Name: Name: 7001 LAKE ELLENOR STE 150 Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: () Delete Title: (X) Change () Addition RICKMAN, MICHAEL R RICKMAN, MICHAEL R Name: Name: Address: 1144 E MARKET STREET Address: 1144 E MARKET STREET City-St-Zip: AKRON, OH 44316 US City-St-Zip: AKRON, OH 44316 US Title: Title: () Delete () Change () Addition MILLER, ANTHONY E Name: Name: 1144 E MARKET STREET Address: Address: City-St-Zip: AKRON, OH 44316 City-St-Zip: Title: **VPAT** () Delete Title: () Change () Addition KRAMER, RICHARD J Name: Name: 1144 E MARKET STREET Address: Address: City-St-Zip: City-St-Zip: AKRON, OH 44316 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RICHARD J KRAMER VPAT 01/22/2004