

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90080 011 ***150.00

DOCUMENT # L16161

1. Entity Name

TP AUTOMOTIVE, INC.



Principal Place of Business
2378 W. GAS PLANT RD
PERRY FL 32347
US

Mailing Address
2378 W. GAS PLANT RD
PERRY FL 32347
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 59-2978905

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

SHINHOLSER, SHIRLEY E.
2378 W. GAS PLANT RD
PERRY FL 32347

Name
Williams, Mary T.
Street Address (P.O. Box Number is Not Acceptable)
2378 W. Gas Plant Rd.

City Perry FL Zip Code 32347

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 Mary T. Williams, Treas. Mary T. Williams, Treas. 2/18/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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 \$5.00 May Be
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete
NAME PICKRON, RAYMOND E.
STREET ADDRESS 2386 W GAS PLANT RD
CITY-ST-ZIP PERRY FL

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

TITLE VD ☐ Delete
NAME THARPE, PHILLIP W.
STREET ADDRESS 865 AB MURPHY RD
CITY-ST-ZIP PERRY FL

TITLE ☒ Change ☐ Addition
NAME Tharpe, Phillip Wayne
STREET ADDRESS 865 AB Murphy Rd.
CITY-ST-ZIP Perry, FL

TITLE STD ☐ Delete
NAME SHINHOLSER, SHIRLEY E.
STREET ADDRESS 20641 MARINA RD
CITY-ST-ZIP PERRY FL

TITLE ☒ Change ☐ Addition
NAME SHINHOLSER, SHIRLEY E.
STREET ADDRESS 20641 MARINA RD.
CITY-ST-ZIP PERRY, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Change ☒ Addition
NAME THARPE, PHILLIP JERROD
STREET ADDRESS 3554 HIGHWAY 221 N
CITY-ST-ZIP PERRY, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME WILLIAMS, MARY T.
STREET ADDRESS 746 MARVIN ROBERTS RD
CITY-ST-ZIP PERRY, FL

TITLE ☐ Delete
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: Mary T. Williams MARY T. WILLIAMS 2/18/05 (850) 584-5568
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #