2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L50372

HANSELMAN AUTO SALES, INC.



Principal Place of Business

C/O RICHARD G HANSELMAN 2767 W TENNESSEE ST TALLAHASSEE, FL 32304

Mailing Address

C/O RICHARD G HANSELMAN 2767 W TENNESSEE ST TALLAHASSEE, FL 32304

FILED Jan 10, 2008 08:00 AM Secretary of State



al.					
DO	NOT	WRITE	IN	THIS	SPACE

01082008 No Chg-P CR2E034 (11/05)

4. FEI Number	Applied For	
59-6609430		Not Applicable
Cartificate of Status Desired		\$8.75 Additional

6. Name and Address of Current Registered Agent

HANSELMAN, RICHARD G 2767 W. TENN. ST. TALLAHASSEE, FL 32304

DO NOT WRITE IN THIS SPACE

			•		•	in M	-
	named entity submits this statement for the pions of registered agent.	ourpose of changing its reg	gistered office or	registered agent, or bot	h, in the State of Florida. I am	familiar with, and	accept
SIGNATURE.							
	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Re	egistered Agent signatur	e required when reinstablig)	DATE		
	E NOW!!! FEE IS \$150.00 ny 1, 2008 Fee will be \$550.00	9. Election Campaign Trust Fund Contribu		\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS		· · · · · · · · · · · · · · · · · · ·	:		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HANSELMAN, RICHARD G 2767 W TENNESSEE ST				•		4
TITLE NAME STREET ADDRESS					U00000777729 01/10/08-80018-	; -022 150.0	ıŊ

DO NOT WRITE IN THIS SPACE

STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP

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

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME STREET ADDRESS

NAME

NAME

TITLE NAME STREET ADDRESS CITY-ST-7IP

TALLAHASSEE, FL 32304