

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M77070

**FILED**  
**Jan 15, 2012**  
**Secretary of State**

**Entity Name:** SCOTTS TIRE & SERVICE CENTER, INC.

**Current Principal Place of Business:**

1889 SW BILTMORE ST  
PORT S. LUCIE, FL 34984

**New Principal Place of Business:**

**Current Mailing Address:**

1889 SW BILTMORE ST  
PORT S. LUCIE, FL 34984

**New Mailing Address:**

**FEI Number:** 65-0048822

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOWELL, GREGORY SCOTT  
1889 SW BILTMORE ST.  
PORT ST. LUCIE, FL 34984 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: HOWELL, GREGORY S. (CHM)  
Address: 806 SE PORTAGE AVE  
City-St-Zip: PORT ST. LUCIE, FL

Title: DVP  
Name: HOWELL, LINETTE YVONNE  
Address: 806 SE PORTAGE AVE  
City-St-Zip: PORT ST. LUCIE, FL

I hereby 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 all other like empowered.

SIGNATURE: SCOTT HOWELL

PRES

01/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date