

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000073111

1. Entity Name
DANNY WILSON AUTO SALES, INC.



Principal Place of Business
**21 5TH STREET NORTH US 17
EAGLE LAKE, FL 33839**

Mailing Address
**P O BOX 1322
EAGLE LAKE, FL 33839**

DO NOT WRITE IN THIS SPACE



01242008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3664773

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WILSON, DANNY
21 FIFTH STREET U.S. 17
EAGLE LAKE, FL 33839**

**DO NOT WRITE
IN THIS SPACE**

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, 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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WILSON, DANNY
STREET ADDRESS	21 FIFTH STREET U.S. 17
CITY - ST - ZIP	EAGLE LAKE, FL 33839
TITLE	VD
NAME	WILSON, LAURIE
STREET ADDRESS	21 FIFTH STREET U.S. 17
CITY - ST - ZIP	EAGLE LAKE, FL 33839
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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02/06/08-80032-004 150.00

**DO NOT WRITE
IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Laurie Wilson **Laurie Wilson Vice president**

Date

Daytime Phone #

1-25-08

(863) 2945311