## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000035821

Name:

Address:

City-St-Zip:

Entity Name: RUSTY MOYE AUTO SALES & SERVICE CENTER, INC

FILED Mar 27, 2008 Secretary of State

Entity Name: RUSTT MOTE AUTO SALES & SER	VICE CENTER, INC.
Current Principal Place of Business:	New Principal Place of Business:
6340 NORTH PALAFOX ST PENSACOLA, FL 32503	
Current Mailing Address:	New Mailing Address:
6340 NORTH PALAFOX ST PENSACOLA, FL 32503	
FEI Number: 59-3659862 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:
MOYE, WM RUSSELL 6340 NORTH PALAFOX ST PENSACOLA, FL 32503 US	
The above named entity submits this statement for the State of Florida.	ne purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered	Agent Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: PD ( ) Delete	Title: PD (X) Change ( ) Addition

MOYE, WM RUSSELL MOYE, WM RUSSELL Name: Name: 533 TÜRNBERRY RD Address: Address: 2757 SEGREST RD City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: PACE, FL 32571 Title: SD () Delete Title: SD (X) Change ( ) Addition MOYE, AMANDA Name: Name: MOYE, AMANDA

 Name:
 MOYE, AMANDA
 Name:
 MOYE, AMANDA

 Address:
 533 TURNBERRY RD
 Address:
 2757 SEGREST RD

 City-St-Zip:
 CANTONMENT, FL 32533
 City-St-Zip:
 PACE, FL 32571

Title: T ( ) Delete Title: ( ) Change ( ) Addition

WHITE, PORTÍA A Name: 2166 WHITE PINES DRIVE Address: PENSACOLA, FL 32526 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: WM RUSSELL MOYE DP 03/27/2008