


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 09, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000072178 1. Entity Name NWF AUTO SALES, INC.	
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Principal Place of Business 707 NEW WARRINGTON RD PENSACOLA, FL 32506	Mailing Address 707 NEW WARRINGTON RD PENSACOLA, FL 32506
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DO NOT WRITE IN THIS SPACE



01262004 No Chg-P CR2E034 (10/03)

4. FEI Number 35-2145926	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM C/O CT CORPORATION 1200 S PINE ISLAND RD PLANATATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRIFFIN, KEVIN L 707 NEW WARRINGTON RD PENSACOLA, FL 32506
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JACKSON, WESLEY E 6900 S GRAY RD INDIANAPOLIS, IN 46237
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLIAMS, TERESA C 11920 SAND DOLLAR CIR INDIANAPOLIS, IN 46256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JACKSON, BLAKE A 5600 E SOUTHPORT RD INDIANAPOLIS, IN 46237
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, KYLE E 5954 N COLLEGE AVE INDIANAPOLIS, IN 46220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000042936
02/10/04-80044-020 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  Kevin L. Griffin 1/31/04 850-455-4422	DATE Daytime Phone #
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