

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000110754

Entity Name: CITRUS PARK TIRE, INC.

FILED
Apr 15, 2005
Secretary of State

Current Principal Place of Business:

3521 BELL SHOALS RD
VALRICO, FL 335946187

New Principal Place of Business:

Current Mailing Address:

3521 BELL SHOALS RD
VALRICO, FL 335946187

New Mailing Address:

FEI Number: 59-3755946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONG, SHAWN
3521 BELL SHOALS RD
VALRICO, FL 33594 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LONG, D.C.
Address: 6822 OLD POLK CITY RD
City-St-Zip: LAKE LAND, FL 33809

Title: VPSD () Delete
Name: LONG, SHAWN
Address: 3521 BELL SHOALS RD
City-St-Zip: VALRICO, FL 335946187

Title: V () Delete
Name: LONG, SHANNON
Address: 3521 BELL SHOALS RD
City-St-Zip: VALRICO, FL 335946187

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LONG, D.C.
Address: 3521 BELL SHOALS ROAD
City-St-Zip: VALRICO, FL 33594

Title: VPSD (X) Change () Addition
Name: LONG, SHAWN
Address: 3521 BELL SHOALS RD
City-St-Zip: VALRICO, FL 33594

Title: V (X) Change () Addition
Name: LONG, SHANNON
Address: 3521 BELL SHOALS RD
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHAWN C. LONG

VSD

04/15/2005

Electronic Signature of Signing Officer or Director

Date