

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000295

FILED  
Feb 03, 2009  
Secretary of State

Entity Name: SUPERIOR AUTOMOTIVE CENTER, INC

**Current Principal Place of Business:**

3550 BARRANCAS AVE  
PENSACOLA, FL 32507

**New Principal Place of Business:**

**Current Mailing Address:**

3550 BARRANCAS AVE  
PENSACOLA, FL 32507

**New Mailing Address:**

FEI Number: 02-0533632      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HINTON, SHERRI  
8902 BOWMAN AVE.  
PENSACOLA, FL 32534      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: P ( ) Delete  
Name: MEYERS, KAREN D  
Address: 8902 BOUMAN AVE  
City-St-Zip: PENSACOLA, FL 32534

Title: VST ( ) Delete  
Name: HINTON, SHERRI  
Address: 8595 BOWMAN AVE  
City-St-Zip: PENSACOLA, FL 32534

Title: D ( ) Delete  
Name: HINTON, JOHN  
Address: 8395 BOWMAN AVW  
City-St-Zip: PENSACOLA, FL 32534

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: KAREN MYERS

PRE

02/03/2009

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

\_\_\_\_\_ Date