

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