

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000001867

FILED
Jan 03, 2007
Secretary of State

Entity Name: TOPLINE TIRE OF HERNANDO, INC.

Current Principal Place of Business:

3371 COMMERCIAL WAY
SPRING HILL, FL 34607

New Principal Place of Business:

Current Mailing Address:

P O BOX 189
TARPON SPRINGS, FL 34688

New Mailing Address:

FEI Number: 01-0572817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURR, RUSSELL F PRES
302 DRIFTWOOD DR. WEST
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

BURR, RUSSELL F PRES
2755 SAINT ANDREWS BLVD
TARPON SPRINGS, FL 34688 US

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: RUSSELL BURR

01/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURR, RUSSELL F
Address: P O BOX 189
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: WOGAN, JOHN
Address: 13251 CORTEZ BLVD
City-St-Zip: BROOKSVILLE, FL 33541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: RUSSELL BURR

PRES

01/03/2007

Electronic Signature of Signing Officer or Director

Date