

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000069406

FILED
Jan 14, 2008
Secretary of State

Entity Name: EASTSIDE AUTOMOTIVE, INC.

Current Principal Place of Business:

1901 TAMIAMI TRAIL
PUNTA GORDA, FL 33950

New Principal Place of Business:

1950 TAMIAMI TRAIL
PUNTA GORDA, FL 33950

Current Mailing Address:

1901 TAMIAMI TRAIL
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 56-2289943 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELPHENSTINE, JOANN P
1901 TAMIAMI TRAIL
PUNTA GORDA, FL 33950 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: HELPHENSTINE, JOANN P
Address: 1901 TAMIAMI TRAIL
City-St-Zip: PUNTA GORDA, FL 33950

Title: VD () Delete
Name: HELPHENSTINE, BRETT R
Address: 1901 TAMIAMI TRAIL
City-St-Zip: PUNTA GORDA, FL 33950

Title: STD () Delete
Name: LLEWELLYN, RICHARD JR.
Address: 1901 TAMIAMI TRAIL
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: LOMBARDO, DIANE H
Address: 1901 TAMIAMI TRAIL
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HELPHENSTINE, JOANN P
Address: 1901 TAMIAMI TRAIL
City-St-Zip: PUNTA GORDA, FL 33950

Title: V (X) Change () Addition
Name: HELPHENSTINE, BRETT R
Address: 1901 TAMIAMI TRAIL
City-St-Zip: PUNTA GORDA, FL 33950

Title: ST (X) Change () Addition
Name: LLEWELLYN, RICHARD JR.
Address: 1901 TAMIAMI TRAIL
City-St-Zip: PUNTA GORDA, FL 33950

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: JO ANN P. HELPHENSTINE

P

01/14/2008

Electronic Signature of Signing Officer or Director

_____ Date