

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000111989

Entity Name: SULLIVAN AUTO SALES INC

FILED
May 22, 2007
Secretary of State

Current Principal Place of Business:

4103 GALL BLVD
ZEPHYRHILLS, FL 33541

New Principal Place of Business:

Current Mailing Address:

PO BOX 3244
ZEPHYRHILLS, FL 33539

New Mailing Address:

FEI Number: 59-3581063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONTI, DAVID T
39542 RICHLAND RD
ZEPHYRHILLS, FL 33540 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CONTI, DAVID T
Address: 39542 RICHLAND RD
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: D () Delete
Name: CONTI, JEANETTE
Address: 39542 RICHLAND RD
City-St-Zip: ZEPHYRHILLS, FL 33540

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: CONTI, DAVID T
Address: 39542 RICHLAND RD
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: D,VP (X) Change () Addition
Name: CONTI, JEANETTE
Address: 39542 RICHLAND RD
City-St-Zip: ZEPHYRHILLS, FL 33540

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: DAVID CONTI

P

05/22/2007

Electronic Signature of Signing Officer or Director

Date