


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 19, 2006 8:00 am**  
**Secretary of State**

01-19-2006 90067 027 \*\*\*150.00

**DOCUMENT-# P03000050994**

1. Entity Name  
**STARK & RUSSELL AUTOMOTIVE INC.**



Principal Place of Business      Mailing Address

**320 NE 33RD AVE.  
 SUITE C  
 GAINESVILLE, FL 32609 US**

**320 NE 33RD AVE.  
 SUITE C  
 GAINESVILLE, FL 32609 US**

2. Principal Place of Business      3. Mailing Address

**1405 NW 53rd Ave  
 Gainesville, FL**

**1405 NW 53rd Ave  
 Gainesville, FL**

City & State      City & State

**32653**      **32653**

Zip      Country      Zip      Country



01162006    Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For

**NOT APPLICABLE**      Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**RUSSELL, PHILLIP N  
 7430 SE 80TH AVE.  
 NEWBERRY, FL 32669**

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_

City      **FL**      Zip Code \_\_\_\_\_

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and date if applicable      (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.       **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	STARK, PAUL C JR. 305 SW 254TH ST. NEWBERRY, FL 32669	TITLE <input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE VP	RUSSELL, PHILLIP N 7430 SE 80TH AVE. NEWBERRY, FL 32669	TITLE <input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE O	STARK, TIANN S 305 SW 254TH ST NEWBERRY, FL 32669	TITLE <input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE O	RUSSELL, SUSAN E 7430 SE 80TH AVE. NEWBERRY, FL 32669	TITLE <input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
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STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Paul C Stark      Susan E Russell      1-16-06      352-222-0922

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Telephone