## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000145105

Entity Name: WHEEL AND TRIM INC.

FILED Jul 01, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

13891 JET PORT LOOP RD 13891 JET PORT LOOP RD

FT MYERS, FL 33913

FT MYERS, FL 33913

**Current Mailing Address: New Mailing Address:** 

13891 JET PORT LOOP RD 13891 JET PORT LOOP RD FT MYERS, FL 33913

FT MYERS, FL 33913

FEI Number: 33-1080248 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GRIGNANI, DEANNA M GRIGNANI, DEANNA M 1931 SE 37TH TERR 5843 S.W. 1ST COURT

CAPE CORAL, FL 33904 US CAPE CORAL, FL 33914 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: DEANNA M. GRIGNANI 07/01/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition ( ) Delete Title:

GRIGNANI, BEN GRIGNANI, BEN B Name: Name: 1931 SE 37TH TERR 5843 S.W. 1ST COURT Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33914

VΡ Title: VΡ Title: () Delete (X) Change ( ) Addition

LITE, CHADE Name: Name: LIFE, CHADE

11532 NACHOGANY RUN 11532 MAHOGANY RUN Address: Address: FORT MYERS, FL 33913 FORT MYERS, FL 33913 City-St-Zip: City-St-Zip:

) Delete Title: Title: (X) Change ( ) Addition

LITE, KYLE LIFE, KYLE Name: Name:

11532 MAHOGANY RUN 11532 MAHOGANY RUN Address: Address: City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: FORT MYERS, FL 33913

Title: () Delete Title: (X) Change ( ) Addition

GRIGNANI, DEANNA M GRIGNANI, DEANNA M Name: Name: Address: 1931 SE 37TH TERR Address: 5843 S.W. 1ST COURT City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33914

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEANNA M. GRIGNANI 07/01/2005 S