


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 13, 2006 8:00 am
Secretary of State

07-13-2006 90021 038 ***563.75

DOCUMENT # P04000129144 1. Entity Name CARTER THOMAS AUTO MART, INC.	
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Principal Place of Business 2721 FOWLER ST FORT MYERS, FL 33901	Mailing Address 2721 FOWLER ST FORT MYERS, FL 33901
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50022413



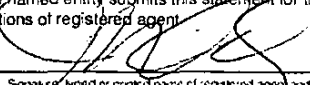
07012006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1627469	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CANDY, JEREMIAH D 4830 PALM BEACH BLVD. FORT MYERS, FL 33905
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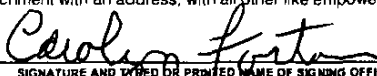
DO NOT WRITE IN THIS SPACE

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: 	Jeremiah H.D. Candy	7-1-06
<small>Signature typed or printed name of registered agent and title if applicable.</small>	<small>(NOTE: Registered Agent signature required when reappointing)</small>	<small>DATE</small>

FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	P FORTIN, CAROLYN G 2721 FOWLER ST FORT MYERS, FL 33901
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TITLE NAME STREET ADDRESS CITY-ST- ZIP	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	

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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: 	Carolyn G Fortin Pres	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>