

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000168562

FILED  
Jan 05, 2008  
Secretary of State

Entity Name: MIRACLE AUTOMOTIVE & TRUCK SERVICE CENTER, INC.

**Current Principal Place of Business:**

10510 DUVAL LANE  
MCCLENNY, FL 32063

**New Principal Place of Business:**

**Current Mailing Address:**

1484 BROWN ROAD  
GREEN COVE SPRINGS, FL 32043

**New Mailing Address:**

FEI Number: 20-2024099

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TOLSON, JOHN F JR.  
462 KINGSLEY AVENUE  
SUITE 101  
ORANGE PARK, FL 32073 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: KING, JUDY M  
Address: 1484 BROWN ROAD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: V ( ) Delete  
Name: MIRACLE, KENNETH W  
Address: 9761 PINE TOP ROAD  
City-St-Zip: GLEN ST. MARY, FL 32040

Title: S ( ) Delete  
Name: MIRACLE, KIRK D  
Address: P.O. BOX 602  
City-St-Zip: MACCLENNY, FL 32063

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUDY M. KING

PRES

01/05/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date