


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000024429	
1. Entity Name FLORIDA TIRE & SERVICE STORES, INC.	

Principal Place of Business 4458 JACKSON STREET MARIANNA, FL 32448	Mailing Address P.O. BOX 5810 MARIANNA, FL 32447
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FILED
Jul 17, 2008 08:00 AM
Secretary of State

DO NOT WRITE IN THIS SPACE



07152008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2874371	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BARNES, DANIEL
4458 JACKSON STREET
MARIANNA, FL 32448

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BARNES, DANIEL E P.O. BOX 5810 MARIANNA, FL 32447
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BARNES, BARBARA C P.O. BOX 5810 MARIANNA, FL 32447
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST BARNES, SUE P.O. BOX 5810 MARIANNA, FL 32447
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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: *Daniel Barnes* Daniel Barnes 7/15/08 850-526-3513

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #