2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 24, 2008 8:00 am
Secretary of State
05-27-2008 90036 036 ***150.00

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1. Entity Name
DENTON'S TIRE & LUBE, INC.

Principal Place of Business	Mailing Address
7519 SE SR 26 TRENTON, FL 32693	P.O. BOX 1492 NEWBERRY, FL 32669

66014755

01082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3603279
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

JONES, ALFRED
7519 SE SR 26
TRENTON, FL 32693

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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: Denton Rowicki 4/30/2008
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ROWICKI, DENTON
STREET ADDRESS	7519 SE SR 26
CITY-ST-ZIP	TRENTON, FL 32693
TITLE	VP
NAME	JONES, ALFRED
STREET ADDRESS	7519 SE SR 26
CITY-ST-ZIP	TRENTON, FL 32693
TITLE	S
NAME	ROWICKI, LISA
STREET ADDRESS	7519 SE SR 26
CITY-ST-ZIP	TRENTON, FL 32693
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Denton Rowicki Lisa Rowicki 5/4/08 (352) 472-2455
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR Date Daytime Phone #