

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157512

FILED
Jan 03, 2008
Secretary of State

Entity Name: KNAPPY'S AUTO CENTER INC.

Current Principal Place of Business:

3691 STATE ROAD 580 W
SUITE A
OLDSMAR, FL 34677

New Principal Place of Business:

1112 US 19 N
HOLIDAY, FL 34691 US

Current Mailing Address:

3691 STATE ROAD 580 W
SUITE A
OLDSMAR, FL 34677

New Mailing Address:

P O BOX 260502
TAMPA, FL 33685 US

FEI Number: 84-1696364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNAPP, STEPHANIE M
3691 STATE ROAD 580 W
SUITE A
OLDSMAR, FL 34677 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: KNAPP, STEPHANIE M
Address: 2123 ARCADIA ROAD
City-St-Zip: HOLIDAY, FL 34690

Title: VD () Delete
Name: KNAPP, STEPHANIE M
Address: 2123 ARCADIA ROAD
City-St-Zip: HOLIDAY, FL 34690

Title: SD () Delete
Name: KNAPP, STEPHANIE M
Address: 2123 ARCADIA ROAD
City-St-Zip: HOLIDAY, FL 34690

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KNAPP, STEPHANIE M
Address: 2123 ARCADIA ROAD
City-St-Zip: HOLIDAY, FL 34690 US

Title: VP (X) Change () Addition
Name: SMITH, THOMAS B
Address: 9506 DRAKEMILL CT
City-St-Zip: TAMPA, FL 33615 US

Title: CFO (X) Change () Addition
Name: TORTORELLO, JOHN V
Address: 4822 BONITA VISTA DR
City-St-Zip: TAMPA, FL 33634 US

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: JOHN V TORTORELLO

CFO

01/03/2008

Electronic Signature of Signing Officer or Director

Date