


**FILED**  
**Apr 19, 2007 8:00 am**  
**Secretary of State**

04-19-2007 90188 050 \*\*\*150.00

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT # P06000051616					
1. Entity Name S & R AUTO TRANSPORT, INC					
Principal Place of Business 8734 COUNTY ROAD 624A BUSHNELL, FL 33513			Mailing Address P O BOX 1146 BUSHNELL, FL 33513		
2. Principal Place of Business - No P.O. Box # 13361 County Rd 772-C Suite, Apt. #, etc		3. Mailing Address City & State Suite, Apt. #, etc			
City & State Webster FL		City & State		4. FEI Number 716-0826725	
Zip 33597		Country Sumter		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CLARK, RODNEY D 8734 COUNTY ROAD 624A BUSHNELL, FL 33513			7. Name and Address of New Registered Agent Name Clark Rodney D. Street Address (P.O. Box Number is Not Accepted) 13361 County Rd 772-C City Webster FL 33597 FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOT: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY ST ZIP	P CLARK, RODNEY D 8734 COUNTY ROAD 624A BUSHNELL, FL 33513	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	P/S/D Clark Rodney D 13361 County Road 772-C Webster, FL 33597	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <i>Clark Rodney D</i>			DATE: 4/16/07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE		

40060000



04182007 Chg-P CR2E034 (12/06)

540-836-0164