

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000021664

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: PRESTIGE IMPORTS OF THOMASVILLE, INC.

**Current Principal Place of Business:**

3355 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

1610 EAST JACKSON STREET  
THOMASVILLE, GA 31792

**Current Mailing Address:**

3355 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32308

**New Mailing Address:**

1610 EAST JACKSON STREET  
THOMASVILLE, GA 31792

FEI Number: 20-8534732

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MYERS & FULLER, P.A.  
2822 REMINGTON GREEN CIR.  
TALLAHASSEE, FL 32308 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: P ( ) Delete  
Name: HORNSBY, CRAIG  
Address: 3355 CAPITAL CIRCLE NE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: SEC ( ) Delete  
Name: HORNSBY, CRAIG  
Address: 3355 CAPITAL CIRCLE NE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: TREA ( ) Delete  
Name: HORNSBY, CRAIG  
Address: 3355 CAPITAL CIRCLE NE  
City-St-Zip: TALLAHASSEE, FL 32308

**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: M.C. HORNSBY

PRES

01/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date