

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000132171

Entity Name: SHODA AUTO SALES, INC.

FILED  
Mar 04, 2010  
Secretary of State

**Current Principal Place of Business:**

2710 NORTH EDGEWOOD AVENUE  
JACKSONVILLE, FL 32254 US

**New Principal Place of Business:**

**Current Mailing Address:**

2710 NORTH EDGEWOOD AVENUE  
JACKSONVILLE, FL 32254 US

**New Mailing Address:**

FEI Number: 26-1571290

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CONNER, STEVEN W  
1106 PARK AVENUE  
ORANGE PARK, FL 32073 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  
Name: RAULERSON, DELORES  
Address: 2710 NORTH EDGEWOOD AVENUE  
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: VP  
Name: SHODA, MICHAEL  
Address: 2710 NORTH EDGEWOOD AVENUE  
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: S  
Name: RAULERSON, DELORES  
Address: 2710 NORTH EDGEWOOD AVENUE  
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: T  
Name: RAULERSON, DELORES  
Address: 2710 NORTH EDGEWOOD AVENUE  
City-St-Zip: JACKSONVILLE, FL 32254 US

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL W. SHODA

VP

03/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date