

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000014700

FILED
Jan 16, 2006
Secretary of State

Entity Name: SPRINGS AUTO SALES INC.

Current Principal Place of Business:

8666 W HALLS RIVER RD
HOMOSASSA, FL 34448 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 3350
HOMOSASSA SPRINGS, FL 34447 US

New Mailing Address:

FEI Number: 59-3172802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PULLIAS, KEITH THOMAS
5216 W. MEADOW ST
HOMOSASSA, FL 34446 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: PULLIAS, KEITH THOMAS
Address: 5216 W. MEADOW ST
City-St-Zip: HOMOSASSA, FL 34446 US

Title: VP () Delete
Name: HICKS, GARY
Address: 1774 GLENEAGLE TERRACE
City-St-Zip: LECANTO, FL 34461 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: DORIS, PULLIAS D
Address: 5216 W. MEADOW ST.
City-St-Zip: HOMOSASSA, FL 34446 US

Title: SEC. () Change (X) Addition
Name: WATSON, LILLIAN M
Address: 4297 S. HALO HILLS TERRACE
City-St-Zip: LECANTO, FL 34461 US

Title: TRES () Change (X) Addition
Name: WATSON, LILLIAN M
Address: 4297 S. HALO HILLS TERRACE
City-St-Zip: LECANTO, FL 34461 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LILLIAN M. WATSON

SEC.

01/16/2006

Electronic Signature of Signing Officer or Director

_____ Date