

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000046852

FILED
Jan 09, 2006
Secretary of State

Entity Name: TIM MOYE AUTOMOTIVE GROUP, INC.

Current Principal Place of Business:

1635 DALE MABRY #12
LUTZ, FL 33548 US

New Principal Place of Business:

17414 US HIGHWAY 41 NORTH
LUTZ, FL 33549 US

Current Mailing Address:

1317 EDGEWATER CT.
LUTZ, FL 33559

New Mailing Address:

1317 EDGEWATER CT.
LUTZ, FL 33559 US

FEI Number: 59-3192632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYE, TIMOTHY
1317 EDGEWATER CT.
LUTZ, FL 33559 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: D () Delete
Name: MOYE, TIMOTHY
Address: 1317 EDGEWATER CT
City-St-Zip: LUTZ, FL 33559

Title: D () Delete
Name: MOYE, CYNTHIA
Address: 1317 EDGEWATER CT
City-St-Zip: LUTZ, FL 33559

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: TIMOTHY LEE MOYE

PRES

01/09/2006

Electronic Signature of Signing Officer or Director

Date