2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000008822

Entity Name: HEWETT TIRE & AUTO CENTER, INC.

FILED Jan 30, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
517 AIRPC PANAMA (ORT RD. CITY, FL 3240(5				
Current Mailing Address:				New Mailing Address:		
517 AIRPC PANAMA (ORT RD. CITY, FL 3240(5				
FEI Number: 59-3239811 FEI Number Applied For () FEI Nu			FEI Nun	mber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
HEWETT, 329 HILAN PANAMA (4 US				
	named entity s of Florida.	submits this statement for the	purpose o	f changing i	ts registered office or	registered agent, or both,
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ag	jent			Date
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:		ADDITION	S/CHANGES TO OF	FICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P () HEWETT, SAND 329 HILAND DR PANAMA CITY,			Title: Name: Address: City-St-Zip:	P (X) Change HEWETT, SANDRA 329 HILAND DR PANAMA CITY, FL 3240	() Addition
Title: Name: Address: City-St-Zip:	V () HEWETT, BILLY 329 HILAND DR PANAMA CITY,			Title: Name: Address: City-St-Zip:	()Change	() Addition
Title: Name: Address: City-St-Zip:	M () HEWETT JR, BI 1311 CROOKEI PANAMA CITY,	D LANE		Title: Name: Address: City-St-Zip:	M (X) Change HEWETT JR, BILLY E 907 MISSISSIPPI AVE. PANAMA CITY, FL 3244	() Addition
Title: Name: Address: City-St-Zip:	C () OWENS, KEND 25 OWENS LAN EUPHAULA, AL			Title: Name: Address: City-St-Zip:	()Change	() Addition
Title: Name: Address: City-St-Zip:	C () HEWETT, ASHL 329 HILAND DR PANAMA CITY,			Title: Name: Address: City-St-Zip:	()Change	() Addition
Title: Name: Address: City-St-Zip:	C () HEWETT, ALEX 329 HILAND DR PANAMA CITY,			Title: Name: Address: City-St-Zip:	()Change	() Addition

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: SANDRA HEWETT PRES 01/30/2009