

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 22, 2008 08:00 AM  
Secretary of State

DOCUMENT # P94000043647

1. Entity Name  
CHARLIE'S AUTO DETAIL INC.



Principal Place of Business  
5529 8TH AVE  
ZEPHYRHILLS, FL 33540

Mailing Address  
5529 8TH AVE  
ZEPHYRHILLS, FL 33540



01152008 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-3231814

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

PROCTOR, CHARLES  
5529 8TH AVE  
ZEPHYRHILLS, FL 33540

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U000000790307  
01/23/08-80024-022 150.00

10. OFFICERS AND DIRECTORS

|                |                       |
|----------------|-----------------------|
| TITLE          | P                     |
| NAME           | PROCTOR, CHARLES      |
| STREET ADDRESS | 5529 8TH AVE          |
| CITY-ST-ZIP    | ZEPHYRHILLS, FL 33540 |
| TITLE          |                       |
| NAME           |                       |
| STREET ADDRESS |                       |
| CITY-ST-ZIP    |                       |
| TITLE          |                       |
| NAME           |                       |
| STREET ADDRESS |                       |
| CITY-ST-ZIP    |                       |
| TITLE          |                       |
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| CITY-ST-ZIP    |                       |
| TITLE          |                       |
| NAME           |                       |
| STREET ADDRESS |                       |
| CITY-ST-ZIP    |                       |

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

