

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000091231

FILED
Feb 18, 2009
Secretary of State

Entity Name: DON'S TIRE DC AUTOMOTIVE, INC.

Current Principal Place of Business:

4145 WHIDDEN BLVD #5&6
CHARLOTTE HARBOR, FL 33980

New Principal Place of Business:

Current Mailing Address:

4145 WHIDDEN BLVD #5&6
CHARLOTTE HARBOR, FL 33980

New Mailing Address:

FEI Number: 65-0575908 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OAKS, DAVID K
252 W MARION AVE
PUNTA GORDA, FL 33950 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: PD () Delete
Name: ALBERTSON, DON
Address: 27048 OMNI LANE
City-St-Zip: PUNTA GORDA, FL 33983

Title: STD () Delete
Name: BENNER, WARREN
Address: 158 BUCKEYE
City-St-Zip: PORT CHARLOTTE, FL 33952

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 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: DON ALBERTSON

PD

02/18/2009

Electronic Signature of Signing Officer or Director

_____ Date