

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 05, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000064460 1. Entity Name MIKE GAGNON'S TIRE & AUTO CENTER, INC.	
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Principal Place of Business 104 E 6TH ST PANAMA CITY, FL 32444 US	Mailing Address 104 E 6TH ST PANAMA CITY, FL 32444 US
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DO NOT WRITE IN THIS SPACE



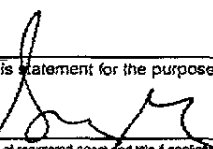
02252004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3330233	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**GAGNON, STEPHANIE
104 E 6TH ST
PANAMA CITY, FL 32401**

**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:  (NOTE: Registered Agent signature required when reappointing) DATE: **3/30/04**

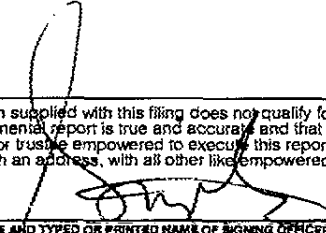
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MICHAEL F. GAGNON 104 E 6TH ST PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEPHANIE GAGNON 104 E 6TH ST PANAMA CITY, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

U00000103755
04/05/04-80069-012 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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.

SIGNATURE:  DATE: **3/30/04** DAYTIME PHONE: **807470096**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR