2004 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

Aug 16, 2004 8:00 am Secretary of State **DOCUMENT # R96000021202** 08-16-2004 90014 020 ***150.00 COUNTRYSIDE TIRE & AUTO SERVICE, INC. Mailing Address Principal Place of Business 3109 S FLORIDA AVE 3109 S FLORIDA AVE INVERNESS, FL 34450-6875 INVERNESS, FL 34450-6875 CR2E034 (10/03) 07072004 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3377159 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PONDER, CHARLES J DO NOT WRITE 21 Bevery Hills Blvd. Bevery Hills, FL 34465 2667-B N FLORIDA AVE. HERNANDO, FL 34442 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE 18 \$150.00 corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS 10. DP LEWIS, ELMER 10135 S EVANS PD STREET ADDRESS INVERNESS, FL 34452 CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

(352)726-2503