## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P96000097869

1. Entity Name

DAVE'S AUTO AND TRUCK SERVICE, INC.



FILED May 08, 2008 08:00 AM Secretary of State

Principal Place of Business

4560 37TH STREET NORTH

UNIT 2

SAINT PETERSBURG, FL 33714

Mailing Address

5825 FLAMINGO COURT NORTH SAINT PETERSBURG, FL 33714



DO NOT WRITE IN THIS SPACE

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٤.	. FEI Number		Applied For
	59-3416375		Not Applicable

5. Certificate of Status Desired

04242008

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

GEIL, MICHAEL D 5325 FLAMINGO CT. N. SAINT PETERSBURG, FL 33714

ST. PETERSBURG, FL 33714

## DO NOT WRITE IN THIS SPACE

No Cha-P

	named entity submits this statement for the $\boldsymbol{\rho}$ ions of registered agent.	purpose of changing its re	gistered office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accep	ot
SIGNATURE.						
	Signature, typed or printed name of registered agent and title i	il applicable. (NOTE: R	egistered Agent algnature	required when reinstating)	DATE	_
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Trust Fund Contrib		\$5.00 May Be Added to Fees	000000350407 06/03/08-80067-007 150.00	
10. OFFICERS AND DIRECTORS			)			_
TITLE	D					
NAME	GEIL, MICHAEL D					
STREET ADDRESS	5325 FLAMINGO CT. N.				• •	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33714				$e^{-\epsilon t} = e^{-\epsilon t}$	
TITLE	D		,		· · · .	
NAME	GEIL, LINDA F					
STREET ADDRESS	5325 FLAMINGO CT. N.				•	

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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 of 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 a other like empowered.

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Wulley XDAU

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