2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000064325

1. Entity Name BIG LAKE AUTO SALES & SERVICE, INC



Principal Place of Business

1107 SE HWY 441 OKEECHOBEE, FL 34974 Mailing Address

1107 SE HWY 441 OKEECHOBEE, FL 34974

FILED Jul 08, 2004 8:00 am Secretary of State

07-08-2004 90092 026 ***150.00

54060275



07012004

No Chg-P

CR2E034 (10/03)

4.	FEI Number
	65-0773134

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PHILLIPS, BRENDA G. 1107 SE HWY 441 OKEECHOBEE, FL 34974

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	named entity submits this statement for the ions of registered agent.	purpose of changing its registered	office or r	registered agent, or both	, in the State of Florida. I am famil	ar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	: if applicable. (NOTE: Registered A	gent signatur	e required when reinstating)	DATE	
	LE NOW!!! FEE IS \$550.00 ue by September 8, 2004	Election Campaign Financ Trust Fund Contribution.	ng 📋	\$5.00 May Be Added to Fees	,	AND TO THE STATE OF THE STATE O
10.	OFFICERS AND DIRE	CTORS	100			
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12. I hereby	certify that the information supplied with this	filing does not qualify for the exem and accurate and that my signature	ption state	ed in Section 119.07(3)(i)	, Florida Statutes. I further certify that as if made under path; that I am a	nat the information n officer or director

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

CICNATUDE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-1-04

Date

Daytime Phone #

Attach Ment Drc. # \$97000064321-54060275-

Sorry this is late, I never recieved the renewal form.

Thank you.

Breade Phillips