2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000084724

1. Entity Name

AUTÓMOTIVE SERVICES OF VOLUSIA CO., INC.



FILED Jan 30, 2008 08:00 AM Secretary of State

Principal Place of Business

34 RIVER RIDGE TRL. ORMOND BEACH, FL 32931 Mailing Address

3960 S. BANANA RIVER BLVD. COCOA BEACH, FL 32931



DO NOT WRITE IN THIS SPACE

01052008 No Chg-P CF

CR2E034 (11/05)

4. FEI Number 59-3475554

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUNYAN, GARY C 3960 S. BANANA RIVER BLVD. COCOA BEACH, FL 32931

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8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida - I am familiar with: and accept	
SIGNATURE	iSuprature, typod or primed mona of registered agont and title if	applicable (NOTE Registered	Agani signaturo	required when reinstitling)	DATE	
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9. Election Campaign Finance After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE 1	DP					
NAME	HOUSE, JAMES R					
STREET ADDRESS	34 RIVER RIDGE TRL.					
CITY-ST-ZIP	ORMOND BEACH, FL 32174					
TITLE	DP				U00000804842	
NAME	RUNYON, GARY				02/05/08-80083-020 150.00	
STREET ADDRESS	3960 S BANANA RIVER BLVD					
CITY - ST- ZIP	COCOA BEACH, FL 32931					
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12. I hereby o	12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. If further certify that the information					

2. Thereby cerning has the information supplied with this iming does not qualify in the exemptors contained in ordanies. Finding statutes a notifical control indicated on this report or suppliemental 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 recover 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICEBOR DIRECTOR

1-25-08

321-784-4515

Daylime Phone