

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000103257

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** RAY CONE AUTOMOTIVE, INC.

**Current Principal Place of Business:**

3035 NE 19 DR  
GAINESVILLE, FL 32609 US

**New Principal Place of Business:**

**Current Mailing Address:**

3035 NE 19 DR  
GAINESVILLE, FL 32609 US

**New Mailing Address:**

**FEI Number:** 59-3484059

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ACKER, DONNA  
3035 NE 19 DR  
GAINESVILLE, FL 32609 US

**Name and Address of New Registered Agent:**

JOHNSON, KATHRYN M  
3035 NE 19 DR  
GAINESVILLE, FL 32609 US

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.

SIGNATURE: KATHRYN M. JOHNSON

03/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CONE, PHILLIP R  
Address: 3035 NE 19 DR  
City-St-Zip: GAINESVILLE, FL 32609

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PHILLIP RAY CONE

P

03/16/2011

Electronic Signature of Signing Officer or Director

Date