

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000020950

FILED
Jan 24, 2008
Secretary of State

Entity Name: FLA. SHORES TRUCK CENTER, INC.

Current Principal Place of Business:

3220 WEST STATE ROAD 442
EDGEWATER, FL 32032

New Principal Place of Business:

3220 WEST STATE ROAD 442
EDGEWATER, FL 32141

Current Mailing Address:

POST OFFICE BOX 880
3220 WEST STATE ROAD 442
EDGEWATER, FL 32032

New Mailing Address:

POST OFFICE BOX 880
3220 WEST STATE ROAD 442
EDGEWATER, FL 32141

FEI Number: 59-3512288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE, DANIEL S
431 NORTH GRANDVIEW AVENUE
DAYTONA BEACH, FL 32118 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALDRIDGE, CHARLES E
Address: 3220 W SR 442
City-St-Zip: EDGEWATER, FL 32141

Title: D () Delete
Name: ALDRIDGE, MARGARET M
Address: 3220 W SR 442
City-St-Zip: EDGEWATER, FL 32141

Title: D () Delete
Name: TORNELLI, VINCENT C III
Address: 3220 W SR 442
City-St-Zip: EDGEWATER, FL 32141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: VINCENT C. TORNELLI

VP

01/24/2008

Electronic Signature of Signing Officer or Director

Date