

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 09, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000095280 1. Entity Name NORTH CITY TIRE, INC.	
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Principal Place of Business 115 W. COLUMBIA AVE. KISSIMMEE, FL 34741	Mailing Address 115 W. COLUMBIA AVE. KISSIMMEE, FL 34741
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DO NOT WRITE IN THIS SPACE



07282004 No Chg-P CR2E034 (10/03)

4. FCI Number 59-3554092	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HADLEY, ELIZABETH 4221 BELL TOWER COURT ORLANDO, FL 32812	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ Signature typed or printed name of registered agent and filer (as applicable)	(NOTE: Registered Agent signature requires witness notations)	DATE _____
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FILE NOW!!! FEE IS \$550.00 Due by September 2, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000169661 08/09/04-800005-022 550.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD HADLEY, JEFFREY 4221 BELL TOWER COURT ORLANDO, FL 32812
TITLE NAME STREET ADDRESS CITY ST ZIP	STD HADLEY, ELIZABETH 4221 BELL TOWER COURT ORLANDO, FL 32812
TITLE NAME STREET ADDRESS CITY ST ZIP	VPD PHILLIPS, TIMOTHY 1525 HEATHER WAY KISSIMMEE, FL 34744
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), Florida Statutes. I further certify that the information included 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.

SIGNATURE: <u>Elizabeth A Hadley</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>7/28/04</u> Date	<u>407-847-3080</u> Daytime Phone #
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