

**FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90013 001 ***150.00

DOCUMENT # *P99000103906*

1. Entity Name

ST. LUCIE AUTOMOTIVE, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5310 ORANGE AVENUE

3. Mailing Address

5310 ORANGE AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

FT.

City & State

FT. PIERCE, FL.

City & State

FT. PIERCE, FL.

Zip

34947

Country

USA

Zip

34947

Country

USA

4. FEI Number

65-0883646

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

CR2E034B (8/05)

40021799

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name *GROTHOUSE, ELIZABETH J.*

Street Address (P.O. Box Number is Not Acceptable)

5310 ORANGE AVENUE

City

FT. PIERCE

FL

Zip Code

34947

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended AR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

*P.
GERALD L. GROTHOUSE
18702 KITTY HAWK ST.
FT. PIERCE, FL. 34981*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

*ST
ELIZABETH J. GROTHOUSE
4402 GATOR TRACE LANE
FT. PIERCE, FL. 34982*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Elizabeth Grothouse
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ELIZABETH GROTHOUSE

2/27/06

Date

772-466-0247

Daytime Phone #