

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 FEB 24 AM 8:00

DOCUMENT # S19865

1. Entry Name
MOSLEY TIRE CO.



Principal Place of Business
14669 US HWY 301 S
STARKE, FL 32091

Mailing Address
14669 US HWY 301 S
STARKE, FL 32091



01062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3045368
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOSLEY, LAWRENCE
14669 US HWY 301 SOUTH
STARKE, FL 32091

DO NOT WRITE
IN THIS SPACE

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

Lawrence Mosley
Signature, typed or printed name of registered agent and title if applicable.

Lawrence Mosley Pres.
(NOTE: Registered Agent signature required when not stating)

DATE

1-6-04

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

D
MOSLEY, LAWRENCE
HIGHWAY 301 SOUTH
STARKE, FL

U00000032369
02/04/04-80185-037 150.00

TITLE
NAME
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CITY - ST - ZIP

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lawrence Mosley Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-04
Date

904.964.6600
Daytime Phone #