

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S23587

FILED  
Jul 07, 2004  
Secretary of State

Entity Name: SPRAY'S AUTO & TRUCK REPAIR, INC.

## Current Principal Place of Business:

15226 OLD HIGHWAY 441  
TAVARES, FL 32778

## New Principal Place of Business:

## Current Mailing Address:

15226 OLD HIGHWAY 441  
TAVARES, FL 32778

## New Mailing Address:

FEI Number: 59-3037559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPRAY, RICHARD E.  
15226 OLD HIGHWAY 441  
TAVARES, FL 32778 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SPRAY, RICHARD E.,  
Address: 15226 OLD HIGHWAY 441  
City-St-Zip: TAVARES, FL

Title: D ( ) Delete  
Name: ABOOD, ROY  
Address: 15226 OLD HIGHWAY 441  
City-St-Zip: TAVARES, FL 32776

Title: D ( ) Delete  
Name: SMITH, CHARLES  
Address: 15226 OLD HIGHWAY 441  
City-St-Zip: TAVARES, FL 32778

## 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 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 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: SPRAY, RICHARD E.

PD

07/07/2004

Electronic Signature of Signing Officer or Director

Date