

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S97878

FILED  
May 02, 2008  
Secretary of State

Entity Name: OCALA AUTO & TRUCK SALES, INC.

## Current Principal Place of Business:

5900 S HWY 441  
OCALA, FL 33480

## New Principal Place of Business:

2855 S PINE AVE  
OCALA, FL 34471

## Current Mailing Address:

2855 S. PINE AVE  
OCALA, FL 34471

## New Mailing Address:

2855 S PINE AVE  
OCALA, FL 34471

FEI Number: 90-0082349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KISWANI, ANDREW A  
2855 S. PINE AVE  
OCALA, FL 34471 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: P ( ) Delete  
Name: GILLIS, HAROLD W  
Address: 2855 S. PINE AVE  
City-St-Zip: OCALA, FL 34471

Title: S ( ) Delete  
Name: GILLIS, HAROLD W  
Address: 2855 S. PINE AVE  
City-St-Zip: OCALA, FL 34471

Title: T ( ) Delete  
Name: GILLIS, HAROLD W  
Address: 2855 S. PINE AVE  
City-St-Zip: OCALA, FL 34471

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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:

Title: S ( ) Change (X) Addition  
Name: MAY, HEIDI V  
Address: 2855 S PINE AVE  
City-St-Zip: OCALA, FL 34471

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: ANDREW ALEX KISWANI

RA

05/02/2008

Electronic Signature of Signing Officer or Director

Date