2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # V60071

1. Entity Name FISHER'S TIRE & SERVICE, INC.



FILED Mar 05, 2004 08:00 AM Secretary of State

Principal Place of Business_

2866 CREIGHTON RD PENSACOLA, FL 32504

Mailing Address

2866 CREIGHTON RD PENSACOLA, FL 32504



02042004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3139726

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FISHER, MICHAEL L. 2866 CREIGHTON RD

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PENSACOLA, FL 32504			IN THIS SPACE			
8. The above the obligat	named entity submits this statement for the prions of registered agent.	urprise of changing its registered (Office or s	egistered agent, or bo	oth, in the State of Floride. I am familiar with, and accept	
SIGNATURE.	Signmure hypod or printed name of registered agent and tide if	applicable (NOTE Registered Ag	eni signaturi	required when remalating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financin Trust Fund Contribution.	s □	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
THE NAME STREET ADDRESS CHY-ST-ZIP	D FISHER, MICHAEL L. 2866 CREIGHTON RD PENSACOLA, FL			HODGOWNTS FC		
tite Name Street address City-St-Zip	D FISHER, THOMAS 2866 CREIGHTON RD PENSACOLA, FL 32504		U00000077156 U3/U5/04-8U030-024 150.00			
TITLE NAME STREET ADDRESS CHY-SI-ZIP	D FISHER, THOMAS 2866 CREIGHTON RD PENSACOLA, FL 32504			DO NOT WRITE		
INTE NAME STREET ADDRESS CREY ST-ZIP				IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated	ertify that the information supplied with this lill on this report or supplemental report is true a	ing does not qualify for the exempted accurate and that my signature	ion state shall ha	d in Section 119.07(3) to the same legal effect	(i), Florida Statutes. I further certify that the information of as if made under oath, that I am an officer or director	

of the corporation or the receiver or trustee empowered to execute this reported 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 AND TYPED OR