

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V68633

FILED
Aug 12, 2008
Secretary of State

Entity Name: HOPKINS MOTOR CO., INC.

Current Principal Place of Business:

1518 U S HWY 90 WEST
LAKE CITY, FL 32055 US

New Principal Place of Business:

Current Mailing Address:

1518 U.S. HWY 90 WEST
LAKE CITY, FL 32055 US

New Mailing Address:

FEI Number: 59-3143921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOPKINS, JOHN S
10011 NW 50TH TERR
GAINESVILLE, FL 32653 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: S () Delete
Name: HOPKINS, THOMAS F
Address: 2033 MAIN STREET, SUITE 600
City-St-Zip: SARASOTA, FL

Title: PD () Delete
Name: HOPKINS, JOHN S
Address: 10011 NW 50TH TERR
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JOHN S. HOPKINS

PD

08/12/2008

Electronic Signature of Signing Officer or Director

Date