


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2007 8:00 am
Secretary of State

03-22-2007 90002 049 ***150.00

DOCUMENT # J46212

1. Entity Name
EAGLE-BUICK-GMC TRUCK, INC.



Principal Place of Business
 1275 S SUNCOAST BLVD
 PO BOX 491907
 HOMOSASSA, FL 34448 US

Mailing Address
 % LARRY M. PHILLIPS
 PO BOX 491907
 LEESBURG, FL 34749-1907 US

40039475



2. Principal Place of Business - No P.O. Box #
 1275 S Suncoast Blvd

3. Mailing Address
 Suite, Apt. #, etc

03052007 Chg-P CR2E034 (12/06)

City & State
 Homosassa, FL

City & State

4. FEI Number
 59-2746233

Applied For
 Not Applicable

Zip
 34448

Country
 US

Zip

Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PHILLIPS, LARRY M. 3320 SO US HWY 27/441 FRUITLAND PARK, FL 34731	Name Larry M Phillips
	Street Address (P.O. Box Number is Not Acceptable) 2100 US HWY 27/441
	City Fruitland Park
	FL Zip Code 34731

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: *Larry M. Phillips* DATE: 3/14/07

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST PHILLIPS, LARRY M. 3320 SO US HWY 27/441 FRUITLAND PARK, FL 34731 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST Larry M Phillips 2100 US HWY 27/441 Fruitland Park, FL 34731 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP PHILLIPS, ROBERT W 1275 S.SUNCOAST BLVD HOMOSASSA, FL 34448 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 titles empowered.

SIGNATURE: *Larry M. Phillips* DATE: 3/14/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #