


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90056 013 ***150.00

DOCUMENT # F02000004347					
1. Entity Name KEYSTONE AUTOMOTIVE INDUSTRIES RESOURCES, INC.					
Principal Place of Business 700 E. BONITA AVENUE POMONA, CA 91767		Mailing Address 85-B CLEVELAND STREET NASHVILLE, TN 37207			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 38-1455545	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	COBD	<input type="checkbox"/> Delete	TITLE	COBD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOGARTY, CHARLES J		NAME	KEISTER, RICHARD L.	
STREET ADDRESS	700 E. BONITA AVENUE		STREET ADDRESS	700 E. BONITA AVENUE	
CITY-ST-ZIP	POMONA, CA 91767		CITY-ST-ZIP	POMONA, CA 91767	
TITLE	P	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALL, D. CURREY		NAME		
STREET ADDRESS	85-B CLEVELAND STREET		STREET ADDRESS		
CITY-ST-ZIP	NASHVILLE, TN 37207		CITY-ST-ZIP		
TITLE	VTD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALUMBO, JOHN M		NAME		
STREET ADDRESS	700 E. BONITA AVENUE		STREET ADDRESS		
CITY-ST-ZIP	POMONA, CA 91767		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAINORA, ANTHONY R		NAME		
STREET ADDRESS	85-B CLEVELAND STREET		STREET ADDRESS		
CITY-ST-ZIP	NASHVILLE, TN 37207		CITY-ST-ZIP		
TITLE	ASD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOCKWOOD, JAMES C		NAME		
STREET ADDRESS	700 E. BONITA AVENUE		STREET ADDRESS		
CITY-ST-ZIP	POMONA, CA 91767		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 like empowered.					
SIGNATURE: <u>Anthony R. Dainora</u>		ANTHONY R. DAINORA		4/1/2005 615-373-2050 x114	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

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