

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G47233

FILED  
Jan 14, 2003  
Secretary of State

Entity Name: AUTO PAINT & SUPPLY, INC.

**Current Principal Place of Business:**

2006 WEST GRIFFIN ROAD  
LEESBURG, FL 34748 US

**New Principal Place of Business:**

**Current Mailing Address:**

2006 WEST GRIFFIN ROAD  
LEESBURG, FL 34748 US

**New Mailing Address:**

FEI Number: 59-2307137

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ISAACS, JOHN STEPHEN  
2006 W. GRIFFIN RD.  
LEESBURG, FL 34748 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ST ( ) Delete  
Name: ISAACS, PAMELA,  
Address: 36208 MICRO RACETRACK RD  
City-St-Zip: FRUITLAND PARK, FL

Title: V ( ) Delete  
Name: WILLIAMS, ROGER ARTH, UR  
Address: 1104 LINDA GLEN AVE  
City-St-Zip: FRUITLAND PARK, FL

Title: P ( ) Delete  
Name: ISAACS, JOHN S,  
Address: 36208 MICRO RACETRACK RD  
City-St-Zip: FRUITLAND PARK, FL

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAM ISAACS

ST

01/14/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date