


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 16, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000068645**

1. Entity Name  
**A-1 AUTOMOTIVE CENTER, INC.**



Principal Place of Business <b>15125 CLASSIQUE LANE #3 TAVARES, FL 32778 US</b>	Mailing Address <b>15125 CLASSIQUE LANE #3 TAVARES, FL 32778 US</b>
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01302006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-0082757</b>	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**BETTER BOOKS & TAXES, INC.  
8431 ORANGE BLOSSOM ROAD  
HOWEY-IN-THE-HILLS, FL 34737**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P TOWNS, CONNIE 15125 CLASSIQUE LANE #3 TAVARES, FL 32778
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	T TOWNS, CONNIE 15125 CLASSIQUE LANE #3 TAVARES, FL 32778
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IN THIS SPACE**

000000436737  
02/28/06-80012-916 150.00

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 like empowered.

SIGNATURE:  DATE: **2-13-06** DAYTIME PHONE #: **(352) 343-2110**