

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157327

Entity Name: S & S AUTO SERVICES, INC.

FILED  
May 01, 2006  
Secretary of State

**Current Principal Place of Business:**

1948 PARENTAL HOME ROAD  
SUITE 1  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

1948 PARENTAL HOME ROAD  
SUITE 1  
JACKSONVILLE, FL 32216

**New Mailing Address:**

FEI Number: 20-3866279      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SHULTZ, CHAD A  
1309 ST. JOHNS BLUFF ROAD N  
SUITE 104  
JACKSONVILLE, FL 32225 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: PT ( ) Delete  
Name: CRIST, PAUL  
Address: 1948 PARENTAL HOME ROAD, STE1  
City-St-Zip: JACKSONVILLE, FL 32216

Title: VPT ( ) Delete  
Name: CRIST, SONYA  
Address: 1948 PARENTAL HOME ROAD, SUITE 1  
City-St-Zip: JACKSONVILLE, FL 32216

**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 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: PAUL CRIST

P

05/01/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date