

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000071439

FILED
Apr 23, 2009
Secretary of State

Entity Name: PATTEN'S MY MECHANIC COMPLETE AUTO REPAIR, INC

Current Principal Place of Business:

9639 PALM RIVER ROAD
TAMPA, FL 33619 US

New Principal Place of Business:

Current Mailing Address:

9639 PALM RIVER ROAD
TAMPA, FL 33619 US

New Mailing Address:

FEI Number: 26-3111727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, WALTER E
757 ARLINGTON AVENUE NORTH
ST. PETERSBURG, FL 33701 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: P () Delete
Name: PATTEN, DOLORES A
Address: 6631 - 17TH LANE NORTH
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: VP () Delete
Name: THORPE, RICHARD K
Address: 2718 MARTHA LANE
City-St-Zip: LAND O'LAKES, FL 34639 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THORPE, RICHARD K
Address: 11056 GOLDEN SILENCE DR
City-St-Zip: RIVERVIEW, FL 33579 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD K THORPE

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date