

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000087266

FILED
Mar 05, 2010
Secretary of State

Entity Name: COLLEX COLLISION EXPERTS OF FLORIDA, INC.

Current Principal Place of Business:

12791 METRO PKWY
FORT MYERS, FL 33966

New Principal Place of Business:

Current Mailing Address:

44700 ENTERPRISE DRIVE
CLINTON TOWNSHIP, MI 48038 US

New Mailing Address:

FEI Number: 65-0870958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GAGLIANO, JOHN
12791 METRO PKWY
FORT MYERS, FL 33966 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
Name: GAGLIANO, JOHN
Address: 12791 METRO PKWY
City-St-Zip: FORT MYERS, FL 33966 US

Title: VP
Name: GAGLIANO, ROBERT
Address: 44700 ENTERPRISE DRIVE
City-St-Zip: CLINTON TOWNSHIP, MI 48038 US

Title: PD
Name: LOPEZ, GRACE
Address: 44700 ENTERPRISE DRIVE
City-St-Zip: CLINTON TOWNSHIP, MI 48038 US

Title: S
Name: GAGLIANO, RICHARD
Address: 44700 ENTERPRISE DRIVE
City-St-Zip: CLINTON TOWNSHIP, MI 48038 US

I hereby 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 all other like empowered.

SIGNATURE: GRACE LOPEZ

PD

03/05/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date