

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V12977

FILED
Apr 05, 2004
Secretary of State

Entity Name: AUTO AIR & RADIATOR SERVICE, INC.

Current Principal Place of Business:

3008 W. STRONG STREET
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

3008 W. STRONG STREET
PENSACOLA, FL 32505

New Mailing Address:

FEI Number: 59-3106966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, CHRISTOPHER M
3008 WEST STRONG STREET
PENSACOLA, FL 32505 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: PD () Delete
Name: PATTERSON, DOUG,
Address: 3008 WEST STRONG ST
City-St-Zip: PENSACOLA, FL

Title: V () Delete
Name: CHRISTOPHER M. BROWN,
Address: 1720 JACKS BRANCH RD
City-St-Zip: CANTONMENT, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHRISTOPHER M. BROWN,
Address: 3008 WEST STRONG ST
City-St-Zip: PENSACOLA, FL

Title: V (X) Change () Addition
Name: LEEILA BROWN,
Address: 1720 JACKS BRANCH RD
City-St-Zip: CANTONMENT, FL 32533

Title: TRE. () Change (X) Addition
Name: CHRISTINA M. BROWN,
Address: 211 EMERALD AVE.
City-St-Zip: PENSACOLA, FL 32505

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: LEEILA BROWN

VP

04/05/2004

Electronic Signature of Signing Officer or Director

_____ Date