

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 517327

FILED  
Jan 17, 2011  
Secretary of State

**Entity Name:** JIM'S AUTO SALVAGE, INC.

**Current Principal Place of Business:**

3900 CEMETERY ROAD  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

3900 CEMETERY ROAD  
SEBRING, FL 33870

**New Mailing Address:**

**FEI Number:** 59-1686808

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REED, JIM  
3900 CEMETERY ROAD  
SEBRING, FL 33870 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: REED, JIM  
Address: 2633 VAN PELT RD  
City-St-Zip: SEBRING, FL

Title: V  
Name: REED, JEFFERY H.  
Address: 420 LONGWOOD RD  
City-St-Zip: SEBRING, FL

Title: STD  
Name: REED, SAUNDRA F.  
Address: 2633 VAN PELT RD  
City-St-Zip: SEBRING, FL

Title: V  
Name: REED, JAMES D  
Address: 4100 ARBUCKLE CREEK ROAD  
City-St-Zip: SEBRING, FL 33870

Title: V  
Name: REED, CALE J.  
Address: 4060 ARBUCKLE CREEK RD  
City-St-Zip: SEBRING, FL

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: JIM REED

PD

01/17/2011

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

\_\_\_\_\_  
Date