

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000026529

**Entity Name:** AUTO SERVICE CENTERS, INC.

**Current Principal Place of Business:**

601 U.S. ALTERNATE HIGHWAY 19 NORTH  
PALM HARBOR, FL 34683

**Current Mailing Address:**

116 CRESTWOOD COURT SOUTH  
SAFETY HARBOR, FL 34695

**FEI Number:** 80-0588683

**Certificate of Status Desired:** No

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

LEVIN, LEONARD D  
116 CRESTWOOD COURT SOUTH  
SAFETY HARBOR, FL 34695 US

*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

**Officer/Director Detail :**

Title DP  
Name LEVIN, LEONARD D  
Address 116 CRESTWOOD COURT SOUTH  
City-State-Zip: SAFETY HARBOR FL 34695

Title VP  
Name FERGUSON, CHARLES V  
Address 601 U.S. ALTERNATE HIGHWAY 19  
NORTH  
City-State-Zip: PALM HARBOR FL 34683

Title DSV  
Name SILBERT, JERRY A  
Address 1402 CRESTWOOD COURT NORTH  
City-State-Zip: SAFETY HARBOR FL 34695

Title DVP  
Name WILSON, JAMES T  
Address 13037 ROYAL GEORGE AVENUE  
City-State-Zip: ODESSA FL 33556

*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:** LEONARD D. LEVIN

**PRESIDENT**

**04/15/2017**

Electronic Signature of Signing Officer/Director Detail

Date