

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 618330

FILED
Apr 21, 2006
Secretary of State

Entity Name: CENTRAL AUTO REFINISHING SUPPLY, INC.

Current Principal Place of Business:

1025 E. OLEANDER ST
P.O. DRAWER 3527
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

1025 E. OLEANDER ST
P.O. DRAWER 3527
LAKELAND, FL 33801

New Mailing Address:

FEI Number: 59-1927713 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULLIS, HAROLD W JR
2600 FIRST FLORIDA TOWER
TAMPA, FL 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: C () Delete
Name: CAMPBELL, JAMES K,
Address: 215 BELVEDERE
City-St-Zip: CHARLEVOIX, MI

Title: P () Delete
Name: WELCH, TIMOTHY J,
Address: 4925 LIBERTY LN
City-St-Zip: LAKELAND, FL

Title: VP () Delete
Name: WELCH, MARLA
Address: 4925 LIBERTY LANE
City-St-Zip: LAKELAND, FL

Title: ST () Delete
Name: WELCH, ANNE
Address: 1925 DELCREST
City-St-Zip: LAKELAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: WELCH, MARLA,
Address: 4925 LIBERTY LN
City-St-Zip: LAKELAND, FL

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARLA WELCH

P

04/21/2006

Electronic Signature of Signing Officer or Director

_____ Date