2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006380

Entity Name: MANHEIM AUTO BODY REPAIR, INC.

FILED Mar 06, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
6205 PEAC ATLANTA, (VOODY ROAD				
Current Mailing Address:			New Mailir	New Mailing Address:		
6205 PEAC ATLANTA, (VOODY ROAD				
FEI Number: 2	20-0859868	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status D	esired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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.						
SIGNATUR						
	Electroni	c Signature of Registered Agent	t	Date		
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	LANGHORNE, M	EE DUNWOODY ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	EISNER, DEAN I	EE DUNWOODY ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	MERDEK, ANDR	EE DUNWOODY ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	BROE, MICHAÉI	EE DUNWOODY ROAD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	BARNETT, PRÉS	EE DUNWOODY ROAD	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition FIREDMAN, MARIA 6205 PEACHTREE DUNWOODY ROAD ATLANTA, GA 30328		
Title: Name: Address: City-St-Zip:	JACOBSON, RIC	EE DUNWOODY ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify 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: MARIA FRIEDMAN VP 03/06/2009