

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001885

FILED
Jan 02, 2008
Secretary of State

Entity Name: AUTO ADVANTAGE - FORT MYERS, INC.

Current Principal Place of Business:

309 S. GEAR AVENUE
WEST BURLINGTON, IA 52655

New Principal Place of Business:

8900 COLONIAL CENTER DR
FORT MYERS, FL 33905

Current Mailing Address:

309 S. GEAR AVENUE
WEST BURLINGTON, IA 52655

New Mailing Address:

8900 COLONIAL CENTER DR
FORT MYERS, FL 33905

FEI Number: 20-2705842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLANOS TRUXTON, P.A.
12800 UNIVERSITY DRIVE
SUITE 350
FORT MYERS, FL 33907 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: PTD () Delete
Name: SHOTTENKIRK, GREGORY J
Address: 1202 DENMARK HILLTOP
City-St-Zip: FORT MADISON, IA 52627

Title: SD () Delete
Name: GEAGAN, KEVIN
Address: 5998 ASHEVILLE HIGHWAY
City-St-Zip: HENDERSONVILLE, NC 28791

Title: VP () Delete
Name: MAKI, WILLIAM S
Address: 14371 HARBOR LANDINGS DR B-3
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: OFCR (X) Change () Addition
Name: KNAPSKI, LINDA S
Address: 128 SE 24TH ST
City-St-Zip: CAPE CORAL, FL 33990

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: LINDA KNAPSKI

OFCR

01/02/2008

Electronic Signature of Signing Officer or Director

Date