

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H87881

FILED
Jan 10, 2006
Secretary of State

Entity Name: CROSSROADS AUTO REPAIR, INC.

Current Principal Place of Business:

% MITCHELL HOLDEN
1090 E. INDUSTRIAL DRIVE
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

% MITCHELL HOLDEN
1090 E. INDUSTRIAL DRIVE
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 59-2627320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLDEN, MITCHELL
440 FOXSQUIRREL RD
DELTONA, FL 32738 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: PD () Delete
Name: HOLDEN, MITCHELL,
Address: 440 FOXSQUIRREL RD
City-St-Zip: DELTONA, FL 32725 US

Title: VP () Delete
Name: TINDEL, STEVE M VP
Address: 452 PALM DRIVE
City-St-Zip: SANFORD, FL 32771 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MITCHELL HOLDEN

PD

01/10/2006

Electronic Signature of Signing Officer or Director

Date