

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J35890

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: DOUBLE J'S REPAIR SHOP, INC.

**Current Principal Place of Business:**

2-B S. ROSCOE BLVD.  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

2-B S. ROSCOE BLVD.  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

FEI Number: 59-2727471

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCCOY, RONDA  
24 SEATROUT ST  
PONTE VEDRA BEACH, FL 32082 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: DPT ( ) Delete  
Name: MCCOY, JERALD R.  
Address: 24 SEA TROUT ST.  
City-St-Zip: PONTE VEDRA BCH, FL

Title: DVS ( ) Delete  
Name: MCCOY, RONDA C.  
Address: 24 SEA TROUT STREET  
City-St-Zip: PONTE VEDRA BCH, FL

**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 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: RONDA MCCOY

V.P.

04/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date