2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# L06000075840

Entity Name: JACK'S PAINT & COLLISION CENTER LIMITED LIABILITY COMPANY

Current Principal Place of Business:

3791 EDISON AVE
FORT MYERS, FL 33916

New Principal Place of Business:

Current Mailing Address:

3791 EDISON AVE
FORT MYERS, FL 33916

New Mailing Address:

FEI Number: 20-5646914 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIPSCOMB, JACK L
3791 EDISON AVE
FORT MYERS, FL 33916 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

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	LIPSCOMB, JACK L	
Address:	3791 EDISON AVE	
City-St-Zip:	FORT MYERS, FL 33916	
Title:	MGRM	( ) Delete
Name:	LIPSCOMB, KAREN L	
Address:	3791 EDISON AVE	
City-St-Zip:	FORT MYERS, FL 33916	
Title:	MGRM	( ) Delete
Name:	LIPSCOMB, KEVIN M	
Address:	1018 S.W. 23RD STREET	
City-St-Zip:	CAPE CORAL, FL 33990	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JACK LIPSCOMB PRES 04/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date