

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L08532

FILED  
Apr 14, 2005  
Secretary of State

Entity Name: EASTERN AUTO BODY & GLASS, INC.

## Current Principal Place of Business:

FLOERING, DAVID  
417 NORTHEAST 6TH AVE  
BOYNTON BEACH, FL 33435 US

## New Principal Place of Business:

## Current Mailing Address:

FLOERING, DAVID  
417 NORTHEAST 6TH AVE  
BOYNTON BEACH, FL 33435 US

## New Mailing Address:

FEI Number: 65-0139157      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLOERING, DAVID  
2616 NORTHEAST THIRD STREET  
BOYNTON BEACH, FL 33435 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: VP ( ) Delete  
Name: BARBARA BOYD-FLOGRIN, G  
Address: 4973 WAVERLY WOODS TERRACE  
City-St-Zip: LAKE WORTH, FL 33463

Title: P ( ) Delete  
Name: FLOERING, DAVID S  
Address: 4973 WAVERLY WOODS TERRACE  
City-St-Zip: LAKE WORTH, FL 33463

Title: VP ( ) Delete  
Name: JORDAN, DEAN  
Address: 3631 RUSKIN AVE  
City-St-Zip: BOYNTON BEACH, FL 33436

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: DAVID FLOERING

PRES

04/14/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date