

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002083

FILED  
Mar 22, 2010  
Secretary of State

Entity Name: MASTER'S MECHANIC, INC.

**Current Principal Place of Business:**

6445 SE 24 AVE  
OCALA, FL 34480 US

**New Principal Place of Business:**

**Current Mailing Address:**

6445 SE 24TH AVE  
OCALA, FL 34480

**New Mailing Address:**

FEI Number: 59-3583275

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WOODALL, CULLIE B  
6445 SE 24 AVE  
OCALA, FL 34480 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WOODALL, CULLIE B  
Address: 6445 SE 24 AVE  
City-St-Zip: Ocala, FL 34480

Title: D  
Name: WOODALL, SANDRA C  
Address: 6445 SE 24 AVE  
City-St-Zip: Ocala, FL 34480

Title: T  
Name: MILLER, BERNICE  
Address: 4615 SE 58TH PLACE  
City-St-Zip: Ocala, FL 34480

Title: S  
Name: ESCOBAR, CATHY  
Address: 411 SE 82ND PLACE  
City-St-Zip: Ocala, FL 34480

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SANDRA C WOODALL

D

03/22/2010

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

\_\_\_\_\_  
Date