2006 FOR PROFIT CORPORÁTION ANNUAL REPORT

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

FILED Mar 27, 2006 8:00 am Secretary of State 03-27-2006 90248 040 ***158.75

Change

Addition

1. Entity Nam	MENT # P0000003			03-2	.7-2006 90248 040 °	**158.75	
Principal Place of Business 1290 DOYLE ROAD DELTONA, FL 32725		Mailing Address 1290 DOYLE ROAD DELTONA, FL 32725		dan			
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03072008 Chg-l	P CR2E034 (11/0	5)	
City & Stat	6	City & State		4. FEI Number 59-3636594		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status D	esired	Additional	
	6. Name and Address of Curre	nt Registered Agent	<u> </u>	7. Name and Address o		111.00	
SPIEGEL	& UTRERA, P.A.		Name M	ARGARET	KELLY		
343 ALMERIA AVENUE CORAL GABLES, FL 33134			Street Addres	Street Address (P.O. Box Number is Not Acceptable)			
COIVE	ABLCO, FL 30104						
			City DE	LTONA	FL 💯 🤆	604 2 C	
the obligation	named entity submits this statement itons of registered agent. Surveyer, noted or primed name of registered agent.	- Lell	MARGARE	T KELLY SI	3	-10-06	
	ay 1, 2006 Fee will be \$55	0.00 Trust Fünd Con		dded to Fees			
10.	· · · · · · · · · · · · · · · · · · ·	ID DIRECTORS	11.	ADDITIONS/CHANGES	TO OFFICERS AND DIRECT		
NAME STREET ADDRESS CITY-S1-ZIP	PD KELLY, GARY G 1290 DOYLE ROAD DELTONA, FL 32725	☐ Deleta	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Chan	pe 🔲 Addilion	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KELLY, MARGARET M 1290 DOYLE ROAD DELTONA, FL 32725	☐ Delete	TITLE NAME STREET ACORESS CITY-ST-ZIP		Chan	e Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP		Chang	6 Addition	
TIFLE NAME STREET ADDRESS CITY-ST-ZP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIF		☐ Chang	e 🔛 Addition	
TITLE		☐ Delete	TITLE		☐ Chang	e Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ Ociete

SIGNATURE: help	3-10-04	386860-7448
SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECT	DR Date	Deytime Phone #



March 16, 2006

KELLY''S AUTOMOTIVE OF DELTONA, INC. 1290 DOYLE ROAD DELTONA, FL 32725

Subject: KELLY'S AUTOMOTIVE OF BELTONA, INC.

Reference Number:

P00000034363

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH ANNUAL REPORTS SECTION