

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000002133

Entity Name: CELICO AUTO BODY, INC.

FILED
Feb 06, 2009
Secretary of State

Current Principal Place of Business:

309 N. STATE STREET
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 923
BUNNELL, FL 32110

New Mailing Address:

FEI Number: 59-3695493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CELICO, CARLO
17 FERN COURT
PALM COAST, FL 32137 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: PD () Delete
Name: CELICO, CARLO
Address: 301 WEST LAMBERT STREET
City-St-Zip: BUNNELL, FL 321100923

Title: VSTD () Delete
Name: CELICO, FINITA
Address: 301 WEST LAMBERT STREET
City-St-Zip: BUNNELL, FL 321100923

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CELICO, CARLO
Address: 309 N. STATE ST. (US1)
City-St-Zip: BUNNELL, FL 32110-923

Title: VSTD (X) Change () Addition
Name: CELICO, FINITA
Address: 309 N. SATE ST
City-St-Zip: BUNNELL, FL 32110-903

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: CARLO CELICO

PRES

02/06/2009

Electronic Signature of Signing Officer or Director

Date