## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P01000009889

Name:

Address:

City-St-Zip:

Entity Name: MCKENZIE'S GENERAL REPAIR SERVICE, INC.

FILED Dec 21, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5750 EFFIE DR APOPKA, FL 32712 **Current Mailing Address: New Mailing Address:** 5750 EFFIE DR APOPKA, FL 32712 FEI Number: 59-3692895 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCKENZIE, LINDA L 5750 EFFIE DR APOPKA, FL 32712 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPS ( ) Delete Title: () Change () Addition MCKENZIE, LINDA Name: Name: 5750 EFFIE DR Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: Title: DVT Title: () Change () Addition () Delete Name: MCKENZIE, NEIL Name: 5750 EFFIE DR Address: Address: APOPKA, FL 32712 City-St-Zip: City-St-Zip: Title: ( ) Delete Title: ( ) Change (X) Addition VΡ

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.

Name:

Address:

City-St-Zip:

VIVONA, RUDY V

1074 CEASARS COURT

MT. DORA, FL 32757 US

SIGNATURE: LINDA MCKENZIE P 12/21/2009