

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000056293

Entity Name: CCMS AUTO SERVICE, INC.

FILED
Apr 07, 2005
Secretary of State

Current Principal Place of Business:

4711 BLANDING BLVD
JACKSONVILLE, FL 32210C

New Principal Place of Business:

Current Mailing Address:

2144 TRAILWOOD DRIVE
ORANGE PARK, FL 32003

New Mailing Address:

627 CHARLES CARROL ST
ORANGE PARK, FL 32073

FEI Number: 59-3726644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: COSTEA, CHARLES
Address: 2144 TRAILWOOD DRIVE
City-St-Zip: ORANGE PARK, FL 32003

Title: VP () Delete
Name: SCRECIU, MARINO
Address: 620 JOHN ADAMS STREET
City-St-Zip: ORANGE PARK, FL 32073

Title: S () Delete
Name: DAVID, VASILE
Address: 2704 WOODLAND DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: D (X) Delete
Name: COSTEA, DIANA
Address: 4711 BLANDING BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: DAVID, VASILE
Address: 4711 BLANDING BLVD
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COSTEA, CHARLES
Address: 627 CHARLES CARROL ST
City-St-Zip: ORANGE PARK, FL 32073

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES COSTEA

D

04/07/2005

Electronic Signature of Signing Officer or Director

Date