

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000096414

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: BEDNAR'S AUTO SERVICE, INC.

## Current Principal Place of Business:

2102 SW 12TH RD.  
#101  
OCALA, FL 34471

## New Principal Place of Business:

## Current Mailing Address:

2102 SW 12TH RD.  
#101  
OCALA, FL 34471

## New Mailing Address:

FEI Number: 59-3748247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BEDNAR, BRIAN  
11330NW 60TH AVE  
REDDICK, FL 32686 US

## Name and Address of New Registered Agent:

BEDNAR, BRIAN  
4235 SE 13TH ST  
OCALA, FL 34471 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:

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BEDNAR, BRIAN  
Address: 514 SW 2ND AVE.  
City-St-Zip: OCALA, FL 34474

Title: VPD ( ) Delete  
Name: BEDNAR, MICHELLE  
Address: 514 SW 2ND AVE.  
City-St-Zip: OCALA, FL 34474

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: BRIAN BEDNAR

PD

04/21/2009

Electronic Signature of Signing Officer or Director

Date