2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P01000115657

Entity Name: AUTOMOTIVE SERVICE AND PERFORMANCE, INC.

Current Principal Place of Business:

770 CAPITAL CIRCLE SW
TALLAHASSEE, FL 32305

New Principal Place of Business:

4865 CAPITAL CIRCLE, SW
TALLAHASSEE, FL 32305

Current Mailing Address:

PO BOX 235
CRAWFORDVILLE, FL 32326

New Mailing Address:

FEI Number: 30-0016876 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EDWARDS, TAMMY L
709 OLD PLANK RD.
CRAWFORDVILLE, FL 32327 US

Name and Address of New Registered Agent:

EDWARDS, TAMMY L
7 BUNTING DRIVE
CRAWFORDVILLE, FL 32327 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: TAMMY L. EDWARDS 04/29/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CASTLE, SHAWN C
Address: 10424 MERRIBROOK LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: S ( ) Delete
Name: CASTLE, STACEY J
Address: 10424 MERRIBROOK LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP ( ) Delete
Name: EDWARDS, BOBBY G
Address: P.O. BOX 235
City-St-Zip: CRAWFORDVILLE, FL 32326

Title: T ( ) Delete
Name: EDWARDS, TAMMY L
Address: P.O. BOX 235
City-St-Zip: CRAWFORDVILLE, FL 32326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: TAMMY L. EDWARDS T 04/29/2005
Electronic Signature of Signing Officer or Director Date