2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000116309

Entity Name: SCOTTY'S AUTO REPAIR INC

SANTA ROSA BEACH, FL 32459

City-St-Zip:

FILED Apr 29, 2009 Secretary of State

		ONOTO RELIMINATION			
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
20515 US HWY 331 S FREEPORT, FL 32439			194 LYNN DRIVE SANTA ROSA BEACH	194 LYNN DRIVE SANTA ROSA BEACH, FL 32459	
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
55 JANE C SANTA RO	CIRCLE OSA BEACH, F	FL 32459			
FEI Number	: 22-3850447	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
55 JANE C SANTA RO The above	OSA BEACH, F		e purpose of changing its registered	l office or registered agent, or both,	
SIGNATU	RE:				
Election Car		nic Signature of Registered <i>F</i> g Trust Fund Contribution ().	Agent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CHAPMAN, SC 55 JANE CIRC		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	DVST (CHAPMAN, LEI 55 JANE CIRC		Title: Name: Address:	() Change () Addition	

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: LENNA M CHAPMAN DVST 04/29/2009