

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 10, 2007
Secretary of State**

DOCUMENT# P02000010200

Entity Name: AUTO TECH TRAINING, INC..

Current Principal Place of Business:

3642 TAMIAMI TRAIL, UNIT F
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

3642 TAMIAMI TRAIL, UNIT F
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 42-1529007 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HESTER, RICHARD
3642 TAMIAMI TRAIL, UNIT F
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

WILKINSON, DONNA
3642 TAMIAMI TRAIL, UNIT F
PORT CHARLOTTE, FL 33952 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: DONNA J WILKINSON 04/10/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HESTER, RICHARD B
Address: 3642 TAMIAMI TRAIL, UNIT E
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VDMT (X) Delete
Name: WILKINSON, DONNA J
Address: 193 NORFOLK AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: S (X) Delete
Name: WILKINSON, DONNA J
Address: 193 NORFOLK AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDTS (X) Change () Addition
Name: WILKINSON, DONNA J
Address: 193 NORFOLK AVE.
City-St-Zip: PORT CHARLOTTE, FL 33952

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 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: DONNA J WILKINSON PRES 04/10/2007
Electronic Signature of Signing Officer or Director Date