

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000021078

**FILED**  
**Jan 31, 2012**  
**Secretary of State**

**Entity Name:** GEAR AND WHEEL MOBILE REPAIR, INC

**Current Principal Place of Business:**

15668 SR 121 NORTH  
MACCLENNY, FL 320631326

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1326  
MACCLENNY, FL 320631326

**New Mailing Address:**

PO BOX 1326  
MACCLENNY, FL 32063 US

**FEI Number:** 45-0468019

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, JAMES D  
8619 LABEUNA AVE  
MACCLENNY, FL 320631326 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SMITH, JAMES D  
Address: P O BOX 1326  
City-St-Zip: MACCLENNY, FL 32063

Title: D  
Name: SMITH, SANDRA  
Address: P O BOX 1326  
City-St-Zip: MACCLENNY, FL 32063

I hereby 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 all other like empowered.

SIGNATURE: JAMES D. SMITH

PRES

01/31/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date