

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000054842

Entity Name: SAN JOSE COLLISION, INC.

**FILED**  
**Mar 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

11443 SAN JOSE BOULEVARD  
JACKSONVILLE, FL 32223

**New Principal Place of Business:**

**Current Mailing Address:**

11443 SAN JOSE BOULEVARD  
JACKSONVILLE, FL 32223

**New Mailing Address:**

FEI Number: 03-0444092

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: PTD  
Name: CLARKE, SUZANNE  
Address: 11443 SAN JOSE BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32223

Title: SVD  
Name: CLARKE, SCOTT  
Address: 11443 SAN JOSE BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32223

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: SUZANNE CLARKE

PRES

03/11/2011

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

\_\_\_\_\_  
Date