

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000102967

Entity Name: O'CONNOR AUTOMOTIVE, INC.

FILED  
Mar 12, 2006  
Secretary of State

**Current Principal Place of Business:**

5211 J.L. REDMAN PKWY  
PLANT CITY, FL 33567

**New Principal Place of Business:**

**Current Mailing Address:**  
5211 J.L. REDMAN PKWY  
PLANT CITY, FL 33567

**New Mailing Address:**

FEI Number: 05-0532606      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

O'CONNOR, WILLIAM P  
3213 PINE CLUB DRIVE  
PLANT CITY, FL 33566 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: O'CONNOR, WILLIAM P  
Address: POST OFFICE BOX 5273  
City-St-Zip: PLANT CITY, FL 33563

Title: V ( ) Delete  
Name: FULKS, ROBERT F  
Address: P O BOX 4083  
City-St-Zip: PLANT CITY, FL 33563

Title: V ( ) Delete  
Name: CHARBER, COLLEEN A  
Address: 3801 SAND PIPER LANE  
City-St-Zip: SAFETY HARBOR, FL

Title: T ( ) Delete  
Name: O'CONNOR, DEBORAH O  
Address: 3213 PINE CLUB DR  
City-St-Zip: PLANT CITY, FL 33566

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PS (X) Change ( ) Addition  
Name: O'CONNOR, WILLIAM P  
Address: 5211 J L REDMAN PARKWAY  
City-St-Zip: PLANT CITY, FL 33567

Title: V (X) Change ( ) Addition  
Name: FULKS, ROBERT P  
Address: 5211 J L REDMAN PARKWAY  
City-St-Zip: PLANT CITY, FL 33567

Title: V (X) Change ( ) Addition  
Name: SCHARBER, COLLEEN A  
Address: 5211 J L REDMAN PARKWAY  
City-St-Zip: PLANT CITY, FL 33567

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: W P OCONNOR

PS

03/12/2006

Electronic Signature of Signing Officer or Director

Date