2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000102967

Entity Name: O'CONNOR AUTOMOTIVE, INC.

O'CONNOR, DEBORAH O

3213 PINE CLUB DR

PLANT CITY, FL 33566

Name:

Address:

City-St-Zip:

FILED Feb 26, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	REDMAN PKV TY, FL 33567	V Y			
Current Mailing Address:			New Mailing Address:		
	REDMAN PKV TY, FL 33567	/ Y			
FEI Number	: 05-0532606	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
3213 PINE	OR, WILLIAM F ECLUB DRIVE TY, FL 33566				
The above in the State	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agen			ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	O'CONNOR, W	MAN PARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FULKS, ROBE	MAN PARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SCHARBER, C	MAN PARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	т () Delete	Title	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: WILLIAM P OCONNOR PRES 02/26/2008