## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000031469

FILED Jul 07, 2004 Secretary of State

Entity Name: NORWOOD AUTOMOTIVE REPAIR AND TIRE CENTER, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	RWOOD AVEN NVILLE, FL 322			
Current Mailing Address:		New Mailing Address:		
	RWOOD AVEN NVILLE, FL 322			
FEI Number	: 01-0748097	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
6101 NÓF	NUDREY L RWOOD AVEN NVILLE, FL 322			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
	e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
in the Stat	e of Florida. <sup>*</sup> RE:	submits this statement for the		d office or registered agent, or both,  Date
in the Stat SIGNATU In accordar	e of Florida.  RE: Electronice with s. 607.19	nic Signature of Registered Ag	ent	
in the Stat SIGNATU In accordar Election Ca	e of Florida.  RE: Electronice with s. 607.19  mpaign Financin	nic Signature of Registered Ag 13(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ent ot receive the prior notice.	
in the Stat SIGNATU In accordar Election Ca OFFICER Title: Name: Address:	e of Florida.  RE: Electron nce with s. 607.19 mpaign Financin S AND DIREC	nic Signature of Registered Ag (3(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ). TORS: ) Delete ORA M H STREET	ent ot receive the prior notice.	Date
in the Stat SIGNATU In accordar Election Ca	e of Florida.  RE:  Electron nce with s. 607.19 mpaign Financin S AND DIREC  P ( GREENE, LEV: 145 EAST 54TI JACKSONVILL	nic Signature of Registered Ag (3(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ). (TORS:  ) Delete ORA M + STREET E, FL 32208  ) Delete DWAYNE A TH STREET	ent ot receive the prior notice.  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AUDREY L BANKS SEC 07/07/2004