2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037694

FILED Apr 15, 2009 Secretary of State

Entity Name: PRO AMERICAN MACHINE SHOP, INC. **Current Principal Place of Business: New Principal Place of Business:** 4920 B N. US HWY 441 OCALA, FL 34475 **Current Mailing Address: New Mailing Address:** 4920 B N. US HWY 441 OCALA, FL 34475 FEI Number: 30-0184249 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: CLINE, TONY CLINE, TONY K 4920 B N. US HWY 441 4920 B N. US HWY 441 OCALA, FL 34475 OCALA, FL 34475 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: TONY K. CLINE 04/15/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CLINE, TONY K PRES Name: Name: 4920 B N. US HWY 441 Address: Address: City-St-Zip: OCALA, FL 34475 US City-St-Zip: Title: Title: () Change () Addition () Delete CLINE, STACEY N SEC Name: Name: 4920 B N. US HWY 441 Address: Address: OCALA, FL 34475 US City-St-Zip: 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: STACEY N. CLINE SEC. 04/15/2009