

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 09, 2006 8:00 am**  
**Secretary of State**

02-09-2006 90032 003 \*\*\*150.00

<b>DOCUMENT # P03000040252</b> 1. Entity Name <b>J&amp;D AUTOMOTIVE, INC.</b>			
Principal Place of Business <b>4110 PINE TREE PLACE COCOA, FL 32926</b>		Mailing Address <b>4110 PINE TREE PLACE COCOA, FL 32926</b>	
2. Principal Place of Business <b>3810 Murrell Rd.</b> Suite, Apt. #, etc. <b>#104</b> City & State <b>Rockledge FL</b> Zip <b>32955</b> Country <b>Brevard</b>		3. Mailing Address <b>3810 Murrell Rd.</b> Suite, Apt. #, etc. <b>#104</b> City & State <b>Rockledge FL</b> Zip <b>32955</b> Country <b>Brevard</b>	
		02012008 Chg-P CR2E034 (11/05)	
4. FEI Number <b>83-0352327</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>SMITH, DAWN A 4110 PINE TREE PLACE COCOA, FL 32926</b>		7. Name and Address of New Registered Agent Name <b>DAWN A. Westerfield</b> Street Address (P.O. Box Number is Not Acceptable) <b>3810 Murrell Rd.</b> <b>#104</b> City <b>Rockledge</b> <b>FL</b> Zip Code <b>32955</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>SMITH, DAWN A</b> <b>4110 PINE TREE PLACE</b> <b>COCOA, FL 32926</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>DAWN A. Westerfield</b> <b>3810 Murrell Rd., #104</b> <b>Rockledge, FL 32955</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>WESTERFIELD, JOE</b> <b>1398 HOY LAKE COURT</b> <b>ROCKLEDGE, FL 32955</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>3810 Murrell Rd., #104</b> <b>Rockledge, FL 32955</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC <b>SMITH, DAWN A</b> <b>4110 PINE TREE PLACE</b> <b>COCOA, FL 32926</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DAWN A. Westerfield</b> <b>3810 Murrell Rd., #104</b> <b>Rockledge, FL 32955</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Dawn A. Westerfield</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>2/3/06 321-302-3299</u> <small>Date Daytime Phone #</small>	