

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044016

FILED  
Apr 22, 2005  
Secretary of State

**Entity Name:** BUMPER TO BUMPER PAINT SERVICE, INC.

**Current Principal Place of Business:**

3730 MALEE CIRCLE  
SARASOTA, FL 34233

**New Principal Place of Business:**

3730 MALEC CIRCLE  
SARASOTA, FL 34233

**Current Mailing Address:**

3730 MALEE CIRCLE  
SARASOTA, FL 34233

**New Mailing Address:**

3730 MALEC CIRCLE  
SARASOTA, FL 34233

**FEI Number:** 41-2091089

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEARN, ROBERT A  
3730 MALEE CIRCLE  
SARASOTA, FL 34233 US

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

HEARN, ROBERT A  
3730 MALEC CIRCLE  
SARASOTA, FL 34233 US

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:**

04/22/2005

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HEARN, ROBERT A  
Address: 3730 MALEE CIRCLE  
City-St-Zip: SARASOTA, FL 34233

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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:** ROBERT A HEARN

D

04/22/2005

Electronic Signature of Signing Officer or Director

Date