

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000055284

FILED
May 05, 2006
Secretary of State**Entity Name:** LIBERTY AUTO CENTER, INC.**Current Principal Place of Business:**3415 US HIGHWAY 19
HOLIDAY, FL 34691**New Principal Place of Business:****Current Mailing Address:**3844 CHERRYWOOD DR.
HOLIDAY, FL 34691**New Mailing Address:**3652 ROCKROYAL DRIVE
HOLIDAY, FL 34691**FEI Number:** 56-2363129**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KELARAKOS, NICHOLAS
3844 CHERRYWOOD DR.
HOLIDAY, FL 34691 US**Name and Address of New Registered Agent:**KELARAKOS, NICHOLAS
3652 ROCKROYAL DRIVE
HOLIDAY, FL 34691 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: NICK KELARAKOS

05/05/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: KELARAKOS, NICHOLAS
Address: 3844 CHERRYWOOD DR.
City-St-Zip: HOLIDAY, FL 34691

Title: VP (X) Delete
Name: BARLAS, LEE
Address: 324 BAY ARBOR BLVD
City-St-Zip: OLDSMAR, FL 34677

Title: VP (X) Delete
Name: BARLAS, GEORGE
Address: 2401 WOOD POINTE DR
City-St-Zip: HOLIDAY, FL 34691

Title: SEC (X) Delete
Name: BARLAS, LEE
Address: 324 BAY ARBOR BLVD
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: NICK KELARAKOS

PRES

05/05/2006

Electronic Signature of Signing Officer or Director

Date