

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jun 26, 2007  
Secretary of State**

DOCUMENT# P04000004120

Entity Name: ASPHALT REPAIR SERVICE OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

677 N WASHINGTON BLVD  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

677 N WASHINGTON BLVD  
SARASOTA, FL 34236

**New Mailing Address:**

FEI Number: 20-0569801      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LINENGER, RICHARD P  
677 N WASHINGTON BLVD  
SARASOTA, FL 34236      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: LINENGER, RICHARD P  
Address: 677 N WASHINGTON BLVD  
City-St-Zip: SARASOTA, FL 34236

Title: D      ( ) Delete  
Name: LINENGER, SUE A  
Address: 677 N WASHINGTON BLVD  
City-St-Zip: SARASOTA, FL 34236

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

Title: D      ( ) Change (X) Addition  
Name: LINENGER, JEFFREY R  
Address: 677 N WASHINGTON BLVD  
City-St-Zip: SARASOTA, FL 34236

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: SUE LINENGER

D

06/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date