

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000082284

**FILED**  
**Oct 14, 2009**  
**Secretary of State****Entity Name:** K & W AUTO SERVICES, INC.**Current Principal Place of Business:**2512 ANDALUSIA BLVD  
UNIT 1  
CAPE CORAL, FL 33909**New Principal Place of Business:**944 COUNTRY CLUB BLVD  
UNIT 110  
CAPE CORAL, FL 33990**Current Mailing Address:**2512 ANDALUSIA BLVD  
UNIT 1  
CAPE CORAL, FL 33909**New Mailing Address:**PO BOX 151417  
CAPE CORAL, FL 33915**FEI Number:** 20-2336112**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WILLIAMS, WALTER L  
2512 ANDALUSIA BLVD  
1  
CAPE CORAL, FL 33909 US**Name and Address of New Registered Agent:**WILLIAMS, WALTER L  
944 COUNTRY CLUB BLVD  
110  
CAPE CORAL, FL 33990 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: \_\_\_\_\_

Electronic Signature of Registered Agent

10/14/2009

Date

**OFFICERS AND DIRECTORS:****Title:** PRES ( ) Delete  
**Name:** WILLIAMS, WALTER L  
**Address:** 2512 ANDALUSIA BLVD  
**City-St-Zip:** CAPE CORAL, FL 33909 US**Title:** VD ( ) Delete  
**Name:** WILLIAMS, COLETTA C  
**Address:** 2512 ANDALUSIA BLVD  
**City-St-Zip:** CAPE CORAL, FL 33909 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PRES (X) Change ( ) Addition  
**Name:** WILLIAMS, WALTER L  
**Address:** 944 COUNTRY CLUB BLVD  
**City-St-Zip:** CAPE CORAL, FL 33990 US**Title:** VD (X) Change ( ) Addition  
**Name:** WILLIAMS, COLETTA C  
**Address:** 944 COUNTRY CLUB BLVD  
**City-St-Zip:** CAPE CORAL, FL 33990 US

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: WALTER L WILLIAMS

Electronic Signature of Signing Officer or Director

PD

10/14/2009

Date