

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000104272

FILED
Apr 16, 2007
Secretary of State

Entity Name: UNIGUE PAINT AND BODY COLLISION OF OKEECHOBEE, INC.

Current Principal Place of Business:

765 NE 3RD AVENUE
OKEECHOBEE, FL 34972

New Principal Place of Business:

Current Mailing Address:

2831 SE 18TH TERRACE
OKEECHOBEE, FL 34974

New Mailing Address:

FEI Number: 04-3605906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNDON, BIRAN C
800 VIRGINIA AVE
381
FORT PIERCE, FL 34982 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P D () Delete
Name: WILLIAMS, GINA
Address: 2831 SE 18TH TERR
City-St-Zip: OKEECHOBEE, FL 34974

Title: S D () Delete
Name: WILLIAMS, LONNIE
Address: 2831 SE 18TH TERR
City-St-Zip: OKEECHOBEE, FL 34974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LONNIE WILLIAMS

PD

04/16/2007

Electronic Signature of Signing Officer or Director

Date