

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000011033

Entity Name: DON'S GARAGE OF OCALA, INC.

FILED
Nov 21, 2007
Secretary of State

Current Principal Place of Business:

218 SW 10TH ST.
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

218 SW 10TH ST.
OCALA, FL 34471

New Mailing Address:

FEI Number: 20-2185544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUCKETT, CYNTHIA
180 SE 59TH STREET
OCALA, FL 34480 US

Name and Address of New Registered Agent:

THERIAULT, KEVIN L
180 SE 59TH STREET
OCALA, FL 34480 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: KEVIN L THERIAULT

11/21/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PATTON, DORIAN III
Address: 180 SE 59TH STREET
City-St-Zip: OCALA, FL 34480

Title: VD () Delete
Name: DUCKETT, JAMES R
Address: P.O. BOX 326
City-St-Zip: OCALA, FL 34478

Title: SD () Delete
Name: DUCKETT, CYNTHIA L
Address: P.O. BOX 326
City-St-Zip: OCALA, FL 34478

Title: D (X) Delete
Name: DUCKETT, GLENA C
Address: P.O. BOX 830385
City-St-Zip: OCALA, FL 34478

Title: D (X) Delete
Name: THERIAULT, KEVIN L
Address: 180 SE 59TH STREET
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PATTON, DORIAN E III
Address: 180 SE 59TH STREET
City-St-Zip: OCALA, FL 34480

Title: VD (X) Change () Addition
Name: THERIAULT, KEVIN L
Address: 180 SE 59TH STREET
City-St-Zip: OCALA, FL 34480

Title: SD (X) Change () Addition
Name: KASPER, KELLY M
Address: 5001 SW 20TH STREET APT#1002
City-St-Zip: OCALA, FL 34474

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 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: DORIAN E PATTON III

PD

11/21/2007

Electronic Signature of Signing Officer or Director

Date