2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000116592

EDMONDS, ANGELA M

8621-1 MCGLOTHLIN ST

JACKSONVILLE, FL 32210 US

Name:

Address:

City-St-Zip:

Entity Name: PAPA JOHN'S AUTO DETAILING & MORE INC.

FILED Aug 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5857 ROOSEVELT BLVD JACKSONVILLE, FL 32244 US **Current Mailing Address: New Mailing Address:** 5857 ROOSEVELT BLVD JACKSONVILLE, FL 32244 US FEI Number: 59-3824546 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HURST, JOHN D 5857 RÓOSEVELT BLVD US JACKSONVILLE, FL 32244 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HURST, JOHN D Name: Name: PO BOX 441423 Address: Address: City-St-Zip: JACKSONVILLE, FL 32244 US City-St-Zip: () Delete Title: VΡ Title: () Change () Addition Name: SPEARS, CAROLYN E Name: 11733 TOM WILKERSON BLVD Address: Address: MACCLENNEY, FL 32063 US City-St-Zip: City-St-Zip: () Delete Title: Title: GM GM (X) Change () Addition

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.

Name:

Address:

City-St-Zip:

HURST, JAMES A

2216 PLACEDA ST

JACKSONVILLE, FL 32209 US

SIGNATURE: JOHN D. HURST PRES 08/08/2007