## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000040182

Entity Name: CITY COLLISION OF OCALA, INC.

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
765 NW 30 OCALA, FI					
Current Mailing Address:			New Mailing Address:		
765 NW 30 OCALA, FI					
FEI Number: 20-4531230 FEI Number Applied For ( )		FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered A				of New Registered Agent:	
TIPTON, D 8265 NW 7 OCALA, FI	76TH LANE	S			
	named entity of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	npaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( TIPTON, DERI 8265 NW 76TH OCALA, FL 34	I LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ( TIPTON, ANTO 8265 NW 76TH OCALA, FL 34	I LANE	Title: Name: Address: City-St-Zip:	( ) 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.

SIGNATURE: ANTOINETTE TIPTON VP 04/01/2009