

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000054036

**FILED**  
**Jul 18, 2011**  
**Secretary of State**

**Entity Name:** ALLSTATE AUTO & TRUCK REPAIR INC.

**Current Principal Place of Business:**

1821 W.30TH STREET  
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

**Current Mailing Address:**

7852 SPRING BRANCH DR S  
JACKSONVILLE, FL 32221

**New Mailing Address:**

**FEI Number:** 90-0501852

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WOOTEN, JAMES JR  
7828 DUBOIS DR  
JACKSONVILLE, FL 32221 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FUTCH JR, THOMAS W  
Address: 7852 SPRING BRANCH DR S  
City-St-Zip: JACKSONVILLE, FL 32221

Title: V  
Name: WOOTEN JR, JAMES  
Address: 7828 DUBOIS DR  
City-St-Zip: JACKSONVILLE, FL 32221

Title: S  
Name: FUTCH, LISA  
Address: 7852 SPRING BRANCH DR S  
City-St-Zip: JACKSONVILLE, FL 32221

I hereby 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 all other like empowered.

SIGNATURE: JAMES E. WOOTEN

TREA

07/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date