# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 13, 2009**
**Secretary of State**

DOCUMENT# P08000074790

**Entity Name:** NATIONAL AUTO SERVICE CENTER LARGO, INC.

**Current Principal Place of Business:**

6187 -126TH AVE. NORTH
LARGO, FL 33773

**New Principal Place of Business:**

1225 WEST BAY DRIVE
LARGO, FL 33770

**Current Mailing Address:**

6187 -126TH AVE. NORTH
LARGO, FL 33773

**New Mailing Address:**

1225 WEST BAY DRIVE
LARGO, FL 33770

**FEI Number: 26-3624683** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

LEVIN, LEONARD D
6187 -126TH AVE. NORTH
LARGO, FL 33773 US

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

LEVIN, LEONARD D
1225 WEST BAY DRIVE
LARGO, FL 33770 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: 04/13/2009
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: LEVIN, LEONARD D
Address: 116 CRESTWOOD CT. SOUTH
City-St-Zip: SAFETY HARBOR, FL 34695

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD ( ) Change (X) Addition
Name: LEVIN, CAROL J
Address: 116 CRESTWOOD COURT SOUTH
City-St-Zip: SAFETY HARBOR, FL 34695

Title: T ( ) Change (X) Addition
Name: POLESKY, MYRA A
Address: 5232 CONCHO OCHO ROAD
City-St-Zip: SNOWFLAKE, AZ 85937 US

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: LEONARD D. LEVIN P 04/13/2009
Electronic Signature of Signing Officer or Director — Date