

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000010257

Entity Name: K & M AUTO CARE 1 INC

FILED
Jan 25, 2011
Secretary of State

Current Principal Place of Business:

45856 PICKETT ST
CALLAHAN, FL 32011

New Principal Place of Business:

670 MCDUFF AVE SOUTH
JACKSONVILLE, FL 32205

Current Mailing Address:

45856 PICKETT ST
CALLAHAN, FL 32011

New Mailing Address:

670 MCDUFF AVE SOUTH
JACKSONVILLE, FL 32205

FEI Number: 27-1812201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOTT, KEVIN L
45856 PICKETT ST
CALLAHAN, FL 32011 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: LOTT, KEVIN L
Address: 45856 PICKETT ST
City-St-Zip: CALLAHAN, FL 32011

Title: P
Name: THOMPSON, CLARENCE L
Address: 1972 WEST 18TH ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: VP
Name: THOMPSON, RENEE D
Address: 1972 WEST 18TH ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: VP
Name: VANDERPOOL, MELISSA S
Address: 45856 PICKETT ST
City-St-Zip: CALLAHAN, FL 32011

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: KEVIN LOTT

P

01/25/2011

Electronic Signature of Signing Officer or Director

_____ Date