

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000062236

FILED  
Jan 04, 2006  
Secretary of State

Entity Name: AUTO-TECH OF BREVARD INCORPORATED

## Current Principal Place of Business:

230 ROSA L. JONES DR.  
COCOA, FL 32922 US

## New Principal Place of Business:

## Current Mailing Address:

230 ROSA L. JONES DR.  
COCOA, FL 32922

## New Mailing Address:

FEI Number: 59-3198436

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDERSON, J. PATRICK  
930 S HARBOR CITY BLVD  
SUITE 505  
MELBOURNE, FL 32901 US

## Name and Address of New Registered Agent:

FRESE, GARY  
930 S HARBOR CITY BLVD  
SUITE 505  
MELBOURNE, FL 32901 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: GARY FRESE

01/04/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: KLENCK, JEROME W SR  
Address: 1205 LANKSPUR STREET  
City-St-Zip: SEBASTIAN, FL 32958

Title: DST ( ) Delete  
Name: RICHARDS, SUSAN  
Address: P O BOX 110486  
City-St-Zip: PALM BAY, FL 32911

Title: D ( ) Delete  
Name: KLENCK, MICHAEL  
Address: 805 E. HIBISCUS BLVD  
City-St-Zip: MELBOURNE, FL 32901

Title: P ( ) Delete  
Name: KLENCK, MARK  
Address: 1900 WIND BROOK DR SE  
City-St-Zip: PALM BAY, FL 32909

Title: D ( ) Delete  
Name: KLENCK, JESSICA  
Address: 1205 LANKSPUR STREET  
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete  
Name: KLENCK, JEROME W. JR  
Address: 490 PERIWINKLE DR  
City-St-Zip: SEBASTIAN, FL 32958

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN S RICHARDS

DST

01/04/2006

Electronic Signature of Signing Officer or Director

Date