## 2005 FOR PROFIT CORPORATION

## ANNUAL REPORT DOCUMENT # P94000027797 SHAMROCK AUTO EXCHANGE, INC.

Principal Place of Business

2005 REID STREET PALATKA, FL 32177 Mailing Address

2005 REID STREET PALATKA, FL 32177

## **FILED** Apr 25, 2005 08:00 AM **Secretary of State**



DO NOT WRITE IN THIS SPACE

CR2E034 (10/03) 04062005 No Chg-P

4. FEI Number 59-3248568

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LASTINGER, LAWTON 2005 REID STREET PALATKA, FL 32177

CITY-ST-ZIP

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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8. 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. I am familiar with, and accept the obligations of registered agent.					
Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent sig				e required when reinstaling)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVD LASTINGER, LAWTON C 2005 REID ST PALATKA, FL 32177				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					000000330224 04/25/05-80150-016 150. <b>00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with anyaddress, with all other like empowered.

SENATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR