

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000049097

Entity Name: AUTO CORRAL INC.

FILED  
Jan 20, 2005  
Secretary of State

## Current Principal Place of Business:

18337 OAKWAY DRIVE  
HUDSON, FL 34667

## New Principal Place of Business:

14323 BIRCH ST  
HUDSON, FL 34667

## Current Mailing Address:

18337 OAKWAY DRIVE  
HUDSON, FL 34667

## New Mailing Address:

14323 BIRCH ST  
HUDSON, FL 34667

FEI Number: 59-3253007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SEDICINO, PATRICK J  
18337 OAKWAY  
HUDSON, FL 34667 US

## Name and Address of New Registered Agent:

SEDICINO, PATRICIA A  
14323 BIRCH ST  
HUDSON, FL 34667 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: PATRICIA A. SEDICINO

01/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SEDICINO, PATRICK J  
Address: 18337 OAKWAY DR  
City-St-Zip: HUDSON, FL 34667

Title: D ( ) Delete  
Name: SEDICINO, PATRICK J  
Address: 18337 OAKWAY DR  
City-St-Zip: HUDSON, FL 34667

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SEDICINO, PATRICIA A  
Address: 14323 BIRCH ST  
City-St-Zip: HUDSON, FL 34667

Title: D (X) Change ( ) Addition  
Name: SEDICINO, PATRICIA A  
Address: 14323 BIRCH ST  
City-St-Zip: HUDSON, FL 34667

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PATRICIA SEDICINO

DIRE

01/20/2005

Electronic Signature of Signing Officer or Director

Date