## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000013603

Entity Name: IMS AUTOBODY, INC.

FILED Jan 09, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4016 W CREST TAMPA, FL 33614 **Current Mailing Address: New Mailing Address:** 4016 W CREST TAMPA, FL 33614 FEI Number: 59-3310231 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SEEKFORD, GEORGE **4016 W CREST** TAMPA, FL 33614 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition SEEKFORD, GEORGE SEEKFORD, GEORGE Name: Name: 4016 W. CREST AVE. 12302 TWIN BRANCH ACRES RD Address: Address: City-St-Zip:

TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33614

Title: Title: (X) Change ( ) Addition () Delete

Name: PAIGE, SEEKFORD Name: PAIGE, SEEKFORD 12302 TWIN BRANCH ACRES RD Address: 4016 W. CREST AVE. Address: TAMPA, FL 336216 TAMPA, FL 33614 City-St-Zip: 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: PAIGE SEEKFORD 01/09/2006 STD