## **2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

## Apr 21, 2004 8:00 am Secretary of State DOCUMENT # P95000062513 1. Entity Name 04-21-2004 90070 039 \*\*\*150.00 JR'S AUTO CLINIC, INC. Principal Place of Business Mailing Address 3724 S.E. 4TH AVENUE 913 SE 13TH PL CAPE CORAL FL 33990 CAPE CORAL FL 33904 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-0605096 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MERRILL, JUDSON R 3724 S.E. 4TH AVENUE Street Address (P.O. Box Number is Not Acceptable) CAPE CORAL FL 33904 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Addition X Change MERRILL, DONALD E SR NAME MERRILL, Donald E. Sr. STREET ADDRESS 3727 SE 3RD PLACE STREET ADDRESS 3727 S.E. 3rd Pl. CITY-ST-ZIP CAPE CORAL FL 33904 CITY-ST-ZIP Cape Coral FL 33904 VP ☐ Delete TITLE XX Change ☐ Addition MERRILL, WAYNE M NAME NAME MERRILL, Wayne M. STREET ADDRESS 3724 S.E. 4TH AVE. STREET ADDRESS 3724 S.E. 4th Ave. CITY-ST-7IP CAPE CORAL FL 33904 CITY-ST-ZIP <u> Cape Coral,FL,33904</u> TITLE ☐ Delete TITLE ☐ Addition X X Change "NAME MERRILL, JUDSON R" NAME MERRILL, Judson R. STREET ADDRESS 3724 SE 4TH AVENUE STREET ADDRESS 3724 S.E. 4th Ave. CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33904 Cape Coral,FL,33904 TITLE ☐ Delete TITLE ☐ Change ☐ Addition MERRILL, BRADFORD NAME NAME 3515 SE 5TH AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CAPE CORAL FL 33904 CITY-ST-ZIE ☐ Delete TITLE ☐ Change Addition BISSON, MARSHA C NAME 619 S.E. 31ST LANE STREET ADDRESS STREET ADDRESS CAPE CORAL FL 33904 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME NORRIS, Jeffrey K. STREET ADDRESS STREET ADDRESS 2126 S.E.10th P1. CITY-ST-7IP CITY-ST-ZIP Cape Coral FL

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 an address, with all other like empowered. Judson R. MERRILL (Pm) 04/19/04 SIGNATURE:

**FILED**