

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000062513

Entity Name: JR'S AUTO CLINIC, INC.

FILED
Apr 25, 2006
Secretary of State

Current Principal Place of Business:

913 SE 13TH PL
CAPE CORAL, FL 33990 US

New Principal Place of Business:

Current Mailing Address:

3724 S.E. 4TH AVENUE
CAPE CORAL, FL 33904

New Mailing Address:

913 SE 13TH PL
CAPE CORAL, FL 33990

FEI Number: 65-0605096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MERRILL, JUDSON R
3724 S.E. 4TH AVENUE
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

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:

Title: TD () Delete
Name: MERRILL, DONALD E SR
Address: 3727 SE 3RD PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: SD () Delete
Name: MERRILL, WAYNE M
Address: 3724 S.E. 4TH AVE.
City-St-Zip: CAPE CORAL, FL 33904

Title: PD () Delete
Name: MERRILL, JUDSON R
Address: 3724 SE 4TH AVENUE
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete
Name: MERRILL, BRADFORD
Address: 3515 SE 5TH AVENUE
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete
Name: BISSON, MARSHA C
Address: 619 S.E. 31ST LANE
City-St-Zip: CAPE CORAL, FL 33904

Title: VPD () Delete
Name: MERRILL, MILES F
Address: 187 SOUTHERN DRIVE
City-St-Zip: ENTERPRISE, AL 36330

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: JUDSON R MERRILL

PD

04/25/2006

Electronic Signature of Signing Officer or Director

_____ Date