2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007
Secretary of State

DOCUMENT# P95000062513

Entity Name: JR'S AUTO CLINIC, INC.

Current Principal Place of Business:

913 SE 13TH PL
CAPE CORAL, FL 33990 US

New Principal Place of Business:

Current Mailing Address:

913 SE 13TH PL
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 65-0605096 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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 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 05/02/2007

Electronic Signature of Signing Officer or Director Date