2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000012000

Entity Name: AUTO BODY WORKS INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1255 U.S. HWY 41 BYPASS SOUTH 490 BUENA VISTA DR VENICE, FL 34285 NOKOMIS, FL 34275

Current Mailing Address: New Mailing Address:

 1255 U.S. HWY 41 BYPASS SOUTH
 490 BUENA VISTA DR

 VENICE, FL 34285
 NOKOMIS, FL 34275

FEI Number: 59-3425420 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:

KORZILIUS, ERIK V
1255 U.S. 41 BYBASS SOUTH
VENICE, FL 34292 US

KORZILIUS, ERIK V
2100 TAMIAMI TRAIL SOUTH
SUITE C
VENICE, FL 34293 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: 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:GOOGINS, CINDY LName:GOOGINS, CINDY LAddress:1255 U.S. HWY 41 BYPASS SOUTHAddress:490 BUENA VISTA DR, UNIT C

City-St-Zip: VENICE, FL 34285 City-St-Zip: NOKOMIS, FL 34275

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

Name: ARP, DAVID L Name: ARP, DAVID L

 Address:
 1255 U.S. HWY 41 BYPASS SOUTH
 Address:
 490 BUENA VISTA DR, UNIT C

 City-St-Zip:
 VENICE, FL 34285
 City-St-Zip:
 NOKOMIS, FL 34275

Title: VP () Delete Title: VP (X) Change () Addition Name: ARP, D. SCOTT Name: ARP, D. SCOTT

Address: 1255 U.S. HWY 41 BYPASS SOUTH Address: 490 BUENA VISTA DR, UNIT C

City-St-Zip: VENICE, FL 34285 City-St-Zip: NOKOMIS, FL 34275

Title: S () Delete Title: S (X) Change () Addition
Name: ARP, CATHERINE M Name: ARP, CATHERINE M

Address: 1255 U.S. HWY 41 BYPASS SOUTH Address: 490 BUENA VISTA DR UNIT C
City-St-Zip: VENICE, FL 34285 City-St-Zip: NOKOMIS, FL 34275

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: DAVID L ARP VP 04/30/2009