2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000081310

Entity Name: AUTO CARE CONCEPTS ETC., INC.

FILED Mar 15, 2005 Secretary of State

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

27 SANDESTIN ESTATES DR 67 HERON POINT CT. DESTIN, FL 32550 DESTIN, FL 32550

Current Mailing Address: New Mailing Address:

27 SANDESTIN ESTATES DR 67 HERON POINT CT. DESTIN, FL 32550 DESTIN, FL 32550

FEI Number: 59-3598101 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:

MCMULLEN, WILLIAM BRIAN
270 SANDESTIN ESTATES DR
DESTIN, FL 32550 US

MCMULLEN, WILLIAM BRIAN
67 HERON POINT CT.
DESTIN, FL 32550 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: 03/15/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MCMULLEN, WILLIAM B
 Name:
 MCMULLEN, WILLIAM B

 Address:
 27 SANDESTIN ESTATES DR
 Address:
 67 HERON POINT CT.

 City-St-Zip:
 DESTIN, FL 32550
 City-St-Zip:
 DESTIN, FL 32550

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM BRIAN MCMULLEN PRES 03/15/2005