

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000103216

FILED
Mar 29, 2011
Secretary of State

Entity Name: CERTIFIED AUTO REPAIR OF JACKSONVILLE, INC.

Current Principal Place of Business:

2104 UNIVERSITY BLVD N
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

2104 UNIVERSITY BLVD N
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 59-3612376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, WADE E PTS
5489 FERN CREEK DR N
JACKSONVILLE, FL 32277 US

Name and Address of New Registered Agent:

ANDERSON, WADE E PVTS
5489 FERN CREEK DR N
JACKSONVILLE, FL 32277 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: WADE E. ANDERSON

03/29/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVTS
Name: ANDERSON, WADE E PVTS
Address: 5489 FERN CREEK DR N
City-St-Zip: JACKSONVILLE, FL 32277

I hereby 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 all other like empowered.

SIGNATURE: WADE E. ANDERSON

PVTS

03/29/2011

Electronic Signature of Signing Officer or Director

Date