

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S14180

FILED
Apr 24, 2006
Secretary of State

Entity Name: CONVENIENT AUTO REPAIR SERVICES, INC.

Current Principal Place of Business:

386 WINGATE CIRCLE
OLDSMAR, FL 346774611 US

New Principal Place of Business:

3503 BRAEMAR ST
LAND O LAKES, FL 346387840 US

Current Mailing Address:

386 WINGATE CIRCLE
OLDSMAR, FL 346774611 US

New Mailing Address:

3503 BRAEMAR ST
LAND O LAKES, FL 346387840 US

FEI Number: 59-3055268

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONOVAN, ROBERT E PRES
386 WINGATE CIRCLE
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

DONOVAN, ROBERT E PRES
3503 BRAEMAR ST
LAND O LAKES, FL 346387840 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:

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DONOVAN, ROBERT E.,
Address: 386 WINGATE CIRCLE
City-St-Zip: OLDSMAR, FL 346774611

Title: DVS () Delete
Name: DONOVAN, DIANA L.,
Address: 1920 PALM DR.
City-St-Zip: CLEARWATER, FL

Title: T () Delete
Name: DONOVAN, DIANA L.,
Address: 386 WINGATE CIRCLE
City-St-Zip: OLDSMAR, FL 346774611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DONOVAN, ROBERT E.,
Address: 3503 BRAEMAR ST
City-St-Zip: LAND O LAKES, FL 346387840 US

Title: DVS (X) Change () Addition
Name: DONOVAN, DIANA L.,
Address: 3503 BRAEMAR ST.
City-St-Zip: LAND O LAKES, FL 346387840 US

Title: T (X) Change () Addition
Name: DONOVAN, DIANA L.,
Address: 3503 BRAEMAR ST
City-St-Zip: LAND O LAKES, FL 346387840 US

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: ROBERT E DONOVAN

DP

04/24/2006

Electronic Signature of Signing Officer or Director

Date