2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

DOCUMENT# V00840

Entity Name: KEN'S AUTO REPAIR OF CAPE CORAL, INC.

Current Principal Place of Business:

4533 DEL PRADO BLVD.
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

4533 DEL PRADO BLVD.
CAPE CORAL, FL 33904 US

New Mailing Address:

FEI Number: 65-0308483 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHUMAN, SR, KENNETH L
4533 DEL PRADO BLVD.
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

OFFICERS AND DIRECTORS:

Title: P
Name: SCHUMAN, SR, KENNETH L
Address: 12320 COUNTRY EAGLE LN.
City-St-Zip: CAPE CORAL, FL 33909

Title: VP
Name: SCHUMAN, MARILYN A
Address: 12320 COUNTRY EAGLE LN.
City-St-Zip: CAPE CORAL, FL 33909

Title: S
Name: SCHUMAN, KENNETH L. JR.
Address: 2221 SW 43RD TERR
City-St-Zip: CAPE CORAL, FL 33914

Title: T
Name: SCHUMAN, KIMBERLY A
Address: 227 N.W. 9TH STREET
City-St-Zip: CAPE CORAL, FL 33993

Title: S
Name: BARNES, KAREN M
Address: 622 S.W. 12TH STREET
City-St-Zip: CAPE CORAL, FL 33991

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: KENNETH L SCHUMAN, SR. PRES 03/03/2012

Electronic Signature of Signing Officer or Director Date