

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # V67561 1. Entity Name CARL'S AUTO REPAIR OF S.W. FLORIDA, INC.	
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Principal Place of Business 20 CABANA AVE N. FT. MYERS, FL 33903 US	Mailing Address 20 CABANA AVE N. FT. MYERS, FL 33903 US
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01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FLI Number 65-0359139	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BRADLEY, SUSANNE 20 CABANA AVE NORTH FT. MYERS, FL 33903
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typewritten or printed name of registered agent and the applicable (NOTE: Registered Agent signature required when certifying) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

**000000488866
04/17/06-80023-017 150.00**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DPST BRADLEY, SUSANNE 20 CABANA AVE N. FT. MYERS, FL
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susanne Bradley Susanne Bradley 3/2/06 239-997-0310
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Unit 70 Pages 8