

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000116309

**Entity Name:** SCOTTY'S AUTO REPAIR, INC.

**Current Principal Place of Business:**

194 LYNN DRIVE  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

55 JANE CIRCLE  
SANTA ROSA BEACH, FL 32459

**FEI Number:** 22-3850447

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHAPMAN, SCOTT S  
55 JANE CIRCLE  
SANTA ROSA BEACH, FL 32459 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name CHAPMAN, SCOTT S  
Address 55 JANE CIRCLE  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title DVST  
Name CHAPMAN, LENNA M  
Address 55 JANE CIRCLE  
City-State-Zip: SANTA ROSA BEACH FL 32459

*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:** LENNA CHAPMAN

**DVST**

**04/09/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date