


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2005 08:00 AM
Secretary of State

DOCUMENT # 475351 1. Entity Name A-1 AUTO BODY & SALES, INC.	
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Principal Place of Business 4211 KINGS KWY PORT CHARLOTTE FL 33980 US	Mailing Address 4211 KINGS KWY PORT CHARLOTTE FL 33980 US
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1st MOORE CR2E034 (10/04)

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 59-1831958	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ORTHOUSE, GEORGE G 106 SE SINCLAIR ST. PT. CHARLOTTE FL 33852	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
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FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	P ORTHOUSE, GEORGE G 4211 KINGS HIGHWAY PORT CHARLOTTE FL 33980 <input type="checkbox"/> Delete
TITLE	TVP BENNER, KURT 4211 KINGS HWY. PORT CHARLOTTE FL 33980 <input type="checkbox"/> Delete
TITLE	S COLLINS, JOAN 4211 KINGS HWY. PORT CHARLOTTE FL 33980 <input type="checkbox"/> Delete
TITLE	 <input type="checkbox"/> Delete
TITLE	 <input type="checkbox"/> Delete
TITLE	 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	 <input type="checkbox"/> Change <input type="checkbox"/> Addition

1100000237832
02/21/05-80074-007 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Kurt Benner* 2/16/05 941-629-2727
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #