

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 822508

FILED  
Jan 07, 2010  
Secretary of State

**Entity Name:** BY-PASS PAINT SHOP, INC.

**Current Principal Place of Business:**

1132 N NAPPANEE ST  
ELKHART, IN 46514

**New Principal Place of Business:**

**Current Mailing Address:**

1132 N NAPPANEE ST  
ELKHART, IN 46514

**New Mailing Address:**

**FEI Number:** 35-1099100      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DELPRETE, DONATO A  
1541 SW 12TH AVENUE  
OCALA, FL 34471 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DELPRETE, DANNY  
Address: 2501 WATERBEND DR.  
City-St-Zip: ELKHART, IN 46514 US

Title: VD  
Name: DELPRETE, FLORENCE  
Address: 2501 WATERBEND DR.  
City-St-Zip: ELKHART, IN 46514 US

Title: TD  
Name: DELPRETE, DANNY  
Address: 2501 WATERBEND DR.  
City-St-Zip: ELKHART, IN 46514 US

Title: SD  
Name: DELPRETE, FLORENCE  
Address: 2501 WATERBEND DR.  
City-St-Zip: ELKHART, IN 46514 US

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: DANNY DELPRETE

PD

01/07/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date