

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000101415

FILED
Mar 25, 2009
Secretary of State

Entity Name: NAPLES BUMPER & AUTO BODY SUPPLY, INC.

Current Principal Place of Business:

1017 FIFTH AVENUE NORTH
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

1017 FIFTH AVENUE NORTH
NAPLES, FL 34102

New Mailing Address:

FEI Number: 59-3482220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAVIELLO JR, MICHAEL A ESQ.
800 SEAGATE DRIVE
204
NAPLES, FL 34103 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 () Delete
Name: TURETZKIN, EDWARD
Address: 1017 5TH AVENUE NORTH
City-St-Zip: NAPLES, FL 34102

Title: V () Delete
Name: TURETZKIN, BRAD
Address: 1017 5THAVE NORTH
City-St-Zip: NAPLES, FL 34102

Title: ST () Delete
Name: TURETZKIN, JOY
Address: 1017 5TH AVE NORTH
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: EDWARD TURETZKIN

PD

03/25/2009

Electronic Signature of Signing Officer or Director

_____ Date