

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **347444 (2)**

1. Corporation Name
DRISCOLL'S TOWING SERVICE, INC.



Principal Place of Business: **1701 N DIXIE HIGHWAY POMPANO BEACH FL 33060**
Mailing Address: **1701 N DIXIE HIGHWAY POMPANO BEACH FL 33060**

3. Date Incorporated or Qualified 06/05/1969	3a. Date of Last Report 06/29/1995
4. FEI Number 59-1262839	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> XX	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

**DRISCOLL, ROBERT J
1157 SW 4 AVE
POMPANO BEACH FL 33060**

10. Name and Address of New Registered Agent

81. Name **Robert J. Driscoll, Jr.**
82. Street Address (P.O. Box Number is Not Acceptable)
1701 North Dixie Highway
83.
84. City **Pompano Beach** FL 85. Zip Code **33060**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Robert J. Driscoll Jr.* **Vice-President** DATE: **April 12, 1996**

12. OFFICERS AND DIRECTORS

TITLE	STD	<input type="checkbox"/> DELETE
NAME	DRISCOLL, MARION	
STREET ADDRESS	1157 SW 4TH AVENUE	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	DRISCOLL, JOSEPH	
STREET ADDRESS	961 S CYPRESS RD.	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	DRISCOLL, ROBERT J.	
STREET ADDRESS	1157 SW 4 AVENUE	
CITY-ST-ZIP	POMPANO BCH., FL 00000	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	CTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-ST-ZIP		
2. TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Robin Driscoll	
4.3 STREET ADDRESS	12279 NW 32nd Court	
4.4 CITY-ST-ZIP	Coral Springs, FL 33065	
5.1 TITLE	D/VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Robert J. Driscoll, Jr.	
5.3 STREET ADDRESS	12279 NW 32nd Court	
5.4 CITY-ST-ZIP	Coral Springs, FL 33065	
6.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Cheryl A. Driscoll	
6.3 STREET ADDRESS	961 S. Cypress Road	
6.4 CITY-ST-ZIP	Pompano Beach, FL 33060	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert J. Driscoll Jr.* **Robert J. Driscoll Jr 954-946-4747**
Vice President DATE: **April 12, 1996**

CR2E034 (12/95)