2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

S05749 DOCUMENT

1. Entity Name

WALLER COLLISION SERVICES, INC.



FILED Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90437 047 ***150.00

WALLER, MICHAEL D 4301 CONFEDERATE PT. ROAD, C-48 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ACKSONVILLE FL 32210 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP Change Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP Change Addition Change Addition Change Addition									
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Zip Country Zip Country Zip S. Country S. S. Certificate of Status Desired S. S. 75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Pee Required 8. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent Pee Required 8. Name Address of New Registered Agent Name WALLER, MICHAEL D Street Address (P.O. Box Number is Not Acceptable) 6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 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. 8. IT Name and Address of New Registered Agent State Name City FL Zip Code 6. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 8. IT Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 9. Election Campaign Financing St. Added to Fees Added to Fees Added to Fees 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THE MANE STREET ADDRESS DIVEST-2P WALLER, MICHAEL D STREET ADDRESS DACKSONVILLE FL 32210 City FL Zip Code 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 MANE JACOB, PETER C JACOB, PETE	Suite, Apt.	#, etc.	Suite, Apt. #, etc.	7.000	CHECK HERE IF MAKING CHANGES				
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CITY-ST-ZIP 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

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael D. Waller

☐ Change

☐ Change

☐ Change

Addition

☐ Addition

☐ Addition