

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000004211

**Entity Name:** PROFESSIONAL COLLISION SERVICES INC.

**Current Principal Place of Business:**

3222 SPRINGHILL AVE  
MOBILE, AL 36607

**Current Mailing Address:**

3222 SPRINGHILL AVE  
MOBILE, AL 36607

**FEI Number: 63-1083313**

**Certificate of Status Desired: No**

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

AGENTS AND CORPORATION, INC.  
300 FIFTH AVENUE SOUTH ST.101-330  
NAPLES, FL 34102 US

*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

**Officer/Director Detail :**

Title P  
Name ELMORE SR., WILLIAM F  
Address 4000 DAWSON DR  
City-State-Zip: MOBILE AL 33619

Title S  
Name ELMORE JR, WILLIAM F  
Address 2964 RIVERVIEW PT. S  
City-State-Zip: THEODORE AL 36582

Title V  
Name ELMORE, DONALD B  
Address 2700 ST. ANDREWS PLACE  
City-State-Zip: MOBILE AL 36693

Title T  
Name ELMORE, LINDA  
Address 4000 DAWSON DR  
City-State-Zip: MOBILE AL 36619

*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: DONALD ELMORE**

**VP, CFO**

**02/21/2013**

Electronic Signature of Signing Officer/Director Detail

Date