## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 306773** 

Address:

City-St-Zip:

1405 JEAN CT

JACKSONVILLE, FL 32207 US

Entity Name: BURKHALTER WRECKING INC

FILED Jan 21, 2009 Secretary of State

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Current P	rincipal Plac	e of Business:	New Principal Place of Business:		
2476 KING JACKSON	SS ROAD IVILE, FL 322	09			
Current Mailing Address:			New Mailing Address:		
2476 KING JACKSON	SS ROAD IVILE, FL 322	09			
FEI Number	: 59-1147495	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
2476 KING JACKSON The above	IVILLE, FL 32	209 US	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BURKHALTER 5700 SALERN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BURKHALTER 5895 SHEFFIE	) Delete , HOWARD E, . JR :LD ROAD E, FL 32226 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	DPT ( BURKHALTER	) Delete , PETER J.,	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: PETER J. BURKHALTER DPT 01/21/2009