

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 665078

Entity Name: BMJ TOWING, INC.

FILED  
Jan 08, 2007  
Secretary of State

## Current Principal Place of Business:

419 SW 2ND AVE  
OKEECHOBEE, FL 34974 US

## New Principal Place of Business:

414A S PARROTT AVE  
OKEECHOBEE, FL 34974 US

## Current Mailing Address:

419 SW 2ND AVE  
OKEECHOBEE, FL 34974 US

## New Mailing Address:

414A S PARROTT AVE  
OKEECHOBEE, FL 34974 US

FEI Number: 59-1984791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS, DAVID H  
419 S.W. 2ND AVENUE  
OKEECHOBEE, FL 34974 US

## Name and Address of New Registered Agent:

WILLIAMS, DAVID H  
414A S PARROTT AVE  
OKEECHOBEE, FL 34974 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:

01/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: WILLIAMS, DAVID  
Address: 419 SW 2ND AVE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: VP ( ) Delete  
Name: LOWE, CONSTANCE W  
Address: 849 SW 20 AVE  
City-St-Zip: OKEECHOBEE, FL 34974

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: WILLIAMS, DAVID  
Address: 414A S PARROTT AVE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: VP (X) Change ( ) Addition  
Name: LOWE, CONSTANCE W  
Address: 414A S PARROTT AVE  
City-St-Zip: OKEECHOBEE, FL 34974

I hereby certify that the information supplied with this filing does not qualify for the 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: CONSTANCE W LOWE

VP

01/08/2007

Electronic Signature of Signing Officer or Director

Date