2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004769

2 PLANO DRIVE

GREENVILLE, SC 29617

Address:

City-St-Zip:

FILED Mar 31, 2006 Secretary of State

Entity Name: ATLANTA WRECKER AND CARRIER SALES, INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
P.O. BOX 2 SMYRNA, (2115 GA 30081211	5				
Current Mailing Address:			New Maili	New Mailing Address:		
P.O. BOX 2 SMYRNA, (2115 GA 30081211	5				
FEI Number:	58-2590473	FEI Number Applied For ()	FEI Number Not Appli	icable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CHMIELEW 6301 EAST TAMPA, FL	LE X UGH AVENUE S	6301 EAST	NOWLIN, FRANCISCO 6301 EAST HILLSBOROUGH AVENUE TAMPA, FL 33610 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.						
SIGNATUR	SCO NOWLIN		03/31/2006			
Electronic Signature of Registered Agent Date					Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PCD () MCKINNEY, JE 208 RIVER WA SIMPSONVILLI	LK COURT	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VSTD () MCKINNEY, TR 208 RIVER WA SIMPSONVILLI	LK COURT	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	D ()) Delete /LVIA S	Title: Name:	D MCKINNEY.	(X) Change () Addition SYLVIA S	

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.

Address:

City-St-Zip:

144 RIVERSTONE WAY

GREER, SC 29651

SIGNATURE: TRACY W MCKINNEY **VSTD** 03/31/2006