2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003311

Entity Name: AUTO CLUB SERVICES, INC.

FILED Feb 04, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	LUB DRIVE RN, MI 48126				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	LUB DRIVE RN, MI 48126				
FEI Number	: 38-3370446	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
1200 SOU	PORATION SY ITH PINE ISLA ION, FL 3332	AND ROAD			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PCEO (PODOWSKI, (1 AUTO CLUB DEARBORN, (DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SVP (FEDERICI, AN 1 AUTO CLUB DEARBORN, I	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SVPS (WHITE, RICH, 1 AUTO CLUB DEARBORN, I	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TCFO (MCELROY, J. 1 AUTO CLUB DEARBORN, I	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SVP (MAZZOLA, CH 6514 SHAGBA TROY, MI 480	ARK	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: RICHARD T. WHITE SVPS 02/04/2009