## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000002274

Entity Name: INTERSTATE ROADSIDE ASSISTANCE, CORP.

Apr 04, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

C/O THOMAS R. SCANLON, ESQ. 6120 POWERS FERRY RD NW 333 EARLE OVINGTON BLVD

SUITE 200

ATLANTA, GA 30339

**Current Mailing Address: New Mailing Address:** 

6120 POWERS FERRY RD NW SUITE 200 C/O THOMAS R. SCANLON, ESQ.

333 EARLE OVINGTON BLVD

UNIONDALE, NY 11553 ATLANTA, GA 30339

FEI Number: 20-0795581 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NRAI SERVICES, INC 515 E. PARK AVENUE

UNIONDALE, NY 11553

TALLAHASSEE, FL 32301 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

## **OFFICERS AND DIRECTORS:**

Title:

FETHERSTON, SHAUN M Name:

6120 POWERS FERRY RD NW, SUITE 200 Address:

City-St-Zip: ATLANTA, GA 30339

Title:

Name: MORLEY BREANNE

6120 POWERS FERRY RD NW Address:

ATLANTA, GA 30339 City-St-Zip:

Title:

TIRONE, GEOFFREY J Name:

6120 POWERS FERRY RD NW, SUITE 200 Address:

City-St-Zip: ATLANTA, GA 30339

Title: VΡ

ALTMAN, LAWRENCE J Name:

Address: 6120 POWERS FERRY RD NW, SUITE 200

City-St-Zip: ATLANTA, GA 30339

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: BREANNE MORLEY S 04/04/2011