## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G31135

Title:

Name:

Address:

City-St-Zip:

Entity Name: A-1 AUTO SALVAGE, INC

FILED Jun 17, 2009 Secretary of State

Littly Name: A-TAUTU GALVAGE, INC.					
Current Pr	incipal Place	of Business:	New Principal Place	of Business:	
2324 VULCAN RD APOPKA, FL 32703					
Current Ma	ailing Address	:	New Mailing Address	New Mailing Address:	
2324 VULCAN RD APOPKA, FL 32703			P.O. BOX 4189 APOPKA, FL 32704		
FEI Number:	59-2300687	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:					
STEINBERG, CHARLES L. ESQ. KEY CENTER SO., 2869 SO. DELANEY AVE. ORLANDO, FL 32806 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:					
		Signature of Registered Age	nt	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () I TEIPEL, MIKE A. 1805 E. WASHIN ORLANDO, FL 3	GTON ST.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SEC () I RUFF TEIPEL, N 2901 DELLWOO ORLANDO, FL 3	D DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () I TEIPEL, VERNEI 2901 DELLWOO ORLANDO, FL 3	D DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DIR () I TEIPEL, ANNE 1805 E WASHIN ORLANDO, FL 3		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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: FORREST TEIPEL VP 06/17/2009

( ) Delete

WINTER PARK, FL 32789 US

TEIPEL, FORREST

2525 LAFAYETTE AVE

() Change () Addition