2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008
Secretary of State

DOCUMENT# J04338

Entity Name: MCALLISTER TOWING OF FLORIDA, INC.

Current Principal Place of Business:

1309 ST. JOHNS BLUFF ROAD, NORTH
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

17 BATTERY PLACE
STE 1200
NEW YORK, NY 10004

New Mailing Address:

FEI Number: 59-2659438 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: MCALLISTER, BRIAN B.A.
Address: 17 BATTERY PLACE
City-St-Zip: NEW YORK, NY 10004

Title: VM ( ) Delete
Name: RING, MICHAEL
Address: 17 BATTERY PLACE
City-St-Zip: NEW YORK, NY 10004

Title: PC ( ) Delete
Name: MCALLISTER, BRIAN A
Address: 17 BATTERY PLACE
City-St-Zip: NEW YORK, NY 10004

Title: VP ( ) Delete
Name: MCALLISTER, ERIC M
Address: 17 BATTERY PLACE
City-St-Zip: NEW YORK, NY 10004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: BRIAN B.A. MCALLISTER MR 01/25/2008

Electronic Signature of Signing Officer or Director — Date