

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J04338

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**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:**

17 BATTERY PLACE  
SUITE 1200  
NEW YORK, NY 10004

**Current Mailing Address:**

17 BATTERY PLACE  
STE 1200  
NEW YORK, NY 10004

**New Mailing Address:**

17 BATTERY PLACE  
SUITE 1200  
NEW YORK, NY 10004

**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

**OFFICERS AND DIRECTORS:**

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

Title: PD  
Name: MCALLISTER, BRIAN A  
Address: 17 BATTERY PLACE  
City-St-Zip: NEW YORK, NY 10004

Title: VPT  
Name: MCALLISTER, ERIC M  
Address: 17 BATTERY PLACE  
City-St-Zip: NEW YORK, NY 10004

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: BRIAN B. A. MCALLISTER

VPS

03/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date