2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # J97977

1. Entity Name
AMERICAN RECOVERY SERVICE CO. OF DAYTONA BEACH

SEC... OF STATE
DIVISION OF CORPORATIONS

06 OCT 10 AM 8:26

Principal Place of Business	Mailing Address
2090 S NOVA ROAD STE.B216 DAYTONA BEACH, FL 32119 US	2090 S NOVA ROAD STE.B216 DAYTONA BEACH, FL 32119 US

09252006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2855130 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JOHN H. YATES
2090 S NOVA ROAD STE 2B16
DAYTONA BEACH, FL 32119

7. Name and Address of New Registered Agent

Name PATTY J. YATES
Street Address (P.O. Box Number is Not Acceptable)
2977 WINDLE LANE
City SOUTH DAYTONA FL Zip Code 32119

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Patty J Yates PATTY J. YATES D.P. DATE 10-2-06
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP YATES, JOHN H 2090 S NOVA ROAD STE 2B16 DAYTONA BEACH, FL 32119	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D.P. PATTY J. YATES 2977 WINDLE LANE SOUTH DAYTONA, FL 32119	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST YATES, PAT 2090 S NOVA ROAD STE 2B16 DAYTONA BEACH, FL 32119	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. MELANIE J. ANDERSON 61 SPINNAKER CIRCLE SOUTH DAYTONA, FL 32119	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S.T. LISA G MCCUTCHEON 741 BARROWS DAIRY ROAD PORT ORANGE, FL 32119	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	10/10/06-01058-004 $61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patty J Yates PATTY J. YATES D.P 10-2-06 386-322-9191
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #