

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000046664

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** SKY TOWING AND RECOVERY, LLC

**Current Principal Place of Business:**

1683B S 8TH ST  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

736 MCSWAIN ROAD  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

1683B S. 8TH STREET  
FERNANDINA BEACH, FL 32034

**FEI Number:** 56-2321320

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOOTTON, STACY  
736 MCSWAIN ROAD  
FERNANDINA BEACH, FL 32034 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** WOOTTON, DOUGLAS M  
**Address:** 736 MCSWAIN ROAD  
**City-St-Zip:** FERNANDINA BEACH, FL 32034

**Title:** MGR  
**Name:** WOOTTON, STACY M  
**Address:** 736 MCSWAIN ROAD  
**City-St-Zip:** FERNANDINA BEACH, FL 32034

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** STACY WOOTTON

MGR

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date