

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000108378

**FILED**  
**Jan 26, 2011**  
**Secretary of State**

**Entity Name:** A & B TOWING AND REPAIR, LLC

**Current Principal Place of Business:**

39 NW IRWIN AVE  
W. MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

39 NW IRWIN AVE  
W. MELBOURNE, FL 32904

**New Mailing Address:**

**FEI Number:** 20-3785496

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NARMORE, DONNIE  
39 NW IRWIN AVE  
W. MELBOURNE, FL 32904 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:** NARMORE, DONNIE  
**Address:** 2600 SIMON RD.  
**City-St-Zip:** MELBOURNE, FL 32904 US

**Title:** MGR  
**Name:** CARTER, THOMAS  
**Address:** 780 AUGUST ST., SE  
**City-St-Zip:** PALM BAY, FL 32909 US

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:** DONNIE NARMORE

MGR

01/26/2011

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