

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000023118

Entity Name: POWER TOWING, L.L.C.

FILED
Apr 12, 2008
Secretary of State

Current Principal Place of Business:

C/O 11111-70 SAN JOSE BOULEVARD #239
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

C/O 11111-70 SAN JOSE BOULEVARD #239
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 34-2061922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACK, DWAIN A
C/O 11514 JANICE LANE
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

MACK, DWAIN A
C/O 11514 JOANCE LANE
JACKSONVILLE, FL 32223 US

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:

04/12/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MACK, DWAIN A
Address: C/O 11111-70 SAN JOSE BOULEVARD #239
City-St-Zip: JACKSONVILLE, FL 32223

Title: MGRM () Delete
Name: URFF, CARLA M
Address: 2928 PLUMMER COVE RD
City-St-Zip: JACKSONVILLE, FL 32223

Title: MGRM () Delete
Name: URFF, BRUCE W
Address: 2928 PLUMMER COVE RD
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES:

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 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: CARLA M URFF

MGRM

04/12/2008

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