

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000023118

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

**FILED**  
**Mar 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3300 POWERS AVE  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

11111-70 SAN JOSE BLVD  
#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 JOANCE LANE  
JACKSONVILLE, FL 32223 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: MGRM  
Name: MACK, DWAIN A  
Address: C/O 11514 JOANCE LANE  
City-St-Zip: JACKSONVILLE, FL 32223

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

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

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: CARLA M. URFF

MGRM

03/18/2011

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