

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000052632

FILED
Jul 29, 2009
Secretary of State

Entity Name: OC'S TOWING AND RECOVERY, LLC

Current Principal Place of Business:

436 E. JAMES LEE BLVD.
CRESTVIEW, FL 32539

New Principal Place of Business:

Current Mailing Address:

436 E. JAMES LEE BLVD.
CRESTVIEW, FL 32539

New Mailing Address:

401 E. JAMES LEE BLVD.
CRESTVIEW, FL 32539

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

O'CONNOR, TERESA
436 E. JAMES LEE BLVD.
CRESTVIEW, FL 32539 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: O'CONNOR, JOHN
Address: 436 E. JAMES LEE BLVD.
City-St-Zip: CRESTVIEW, FL 32539

Title: MGRM () Delete
Name: O'CONNOR, TERESA
Address: 436 E. JAMES LEE BLVD.
City-St-Zip: CRESTVIEW, FL 32539

ADDITIONS/CHANGES:

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: TERESA OCONNOR

VP

07/29/2009

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