

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# L58256

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** POOLE'S PAINT BODY AND TOWING, INCORPORATED

**Current Principal Place of Business:**

9006 GIBSONTON DR  
GIBSONTON, FL 33534

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 260502  
TAMPA, FL 33685 US

**New Mailing Address:**

**FEI Number:** 59-3002438

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TORTORELLO, JOHN  
4822 BONITA VISTA DRIVE  
TAMPA, FL 33634 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: POOLE, CLYDE  
Address: 9006 GIBSONTON DR  
City-St-Zip: GIBSONTON, FL 33534

Title: ST ( ) Delete  
Name: POOLE, CYNTHIA  
Address: 9006 GIBSONTON DR  
City-St-Zip: GIBSONTON, FL 33534

Title: V (X) Delete  
Name: TORTORELLO, JOHN V  
Address: 4822 BONITA VISTA DR  
City-St-Zip: TAMPA, FL 33634

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition  
Name: POOLE, CYNTHIA  
Address: 9006 GIBSONTON DR  
City-St-Zip: GIBSONTON, FL 33534 US

Title: V (X) Change ( ) Addition  
Name: TORTORELLO, JOHN V  
Address: 4822 BONITA VISTA DR  
City-St-Zip: TAMPA, FL 33634 US

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN Y TORTORELLO VP

V

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date