

# 2001 UNIFORM BUSINESS REPORT (UBR)

0016943 AF

DOCUMENT # L99000007809

1. Entity Name  
JAMES TOWING, LLC

FILED

01 FEB -9 PM 2:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
14803 PATSY MARIE LANE  
BALM FL 33503

Mailing Address  
PO BOX 338  
BALM FL 33503

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Zip Country

4. FEI Number 59-3608646  
Applied For ☒ Not Applicable  
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

8. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
MGR NETTLES, JAMES E III PO BOX 338 BALM FL 33503  
Delete

10. ADDITIONS/CHANGES  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
400003676764--4  
-02/13/01--01060--016  
\*\*\*\*\*50.00 \*\*\*\*\*50.00  
Change Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *James E Nettles* JAN. 29, 2001 813-634-9302  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (11/00)