


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90266 026 ****61.25

DOCUMENT # N94000002402	
1. Entity Name JACKSONVILLE WRECKER ASSOCIATION, INC.	

Principal Place of Business 1882 DUNN AVE JACKSONVILLE, FL 32218 US	Mailing Address 1882 DUNN AVE JACKSONVILLE, FL 32218 US
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40077601

2. Principal Place of Business - No P.O. Box # 10053 103rd St	3. Mailing Address 10053 103rd St
Suite, Apt. #, etc.	Suite, Apt. #, etc.



04192007 Chg-NP CR2E037 (12/06)

City & State JAX FL	City & State JAX FL
Zip 32210	Country Dural

4. FEI Number 59-2679709	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WILSON, RICHARD 1882 DUNN AVE JACKSONVILLE, FL 32218	
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7. Name and Address of New Registered Agent Vince Serrano (President)	
Street Address (P.O. Box Number is Not Acceptable)	
City JAX FL	Zip Code FL

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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE Vince Serrano Pres.	DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
VP WEISS, ROBERT 7600 BAILEY BODY RD JACKSONVILLE, FL 32216	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
ST SERRANO, VANICE 10053 103RD STREET JACKSONVILLE, FL 32210	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
P SERRANO, VINCE 10053 103RD STREET JACKSONVILLE, FL 32210	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
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SIGNATURE: Vince Serrano	Date 4-20-07	Daytime Phone # 904 771-7111
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