

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000084027

FILED
Jan 09, 2004
Secretary of State

Entity Name: BOATWRIGHT'S GARAGE & TOWING, INC.

Current Principal Place of Business:

14330 N.E. 203RD AVENUE ROAD
FORT MCCOY, FL 32134

New Principal Place of Business:

Current Mailing Address:

14330 N.E. 203RD AVENUE ROAD
FORT MCCOY, FL 32134

New Mailing Address:

FEI Number: 59-3740950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SADLER, LORRAINE S
14330 N.E. 203 AVE RD.
FORT MC COY, FL 32134 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOATWRIGHT, CLINTON A
Address: 14330 N.E. 203RD AVENUE ROAD
City-St-Zip: FORT MCCOY, FL 32134

Title: V () Delete
Name: SCHMIDTKE, OTTO
Address: 16885 NE 141 COURT
City-St-Zip: FORT MCCOY, FL 32134

Title: TD () Delete
Name: SADLER, LORRAINE S
Address: 1433 NE 203 AVE RD
City-St-Zip: FORT MC COY, FL 32134

Title: S () Delete
Name: TAYLOR, SHERRI
Address: 23831 NW 185 ST BOX
City-St-Zip: DAYTONA BEACH, FL 32124

Title: C () Delete
Name: HOWARD, RUEL G
Address: 21655 NE 134 PLACE
City-St-Zip: FORT MC COY, FL 32134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: TAYLOR, SHERRI
Address: P.O. BOX 5412
City-St-Zip: SALT SPRINGS, FL 32124

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHERRI TAYLOR

S

01/09/2004

Electronic Signature of Signing Officer or Director

Date