

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000084027

FILED
Jul 25, 2006
Secretary of State

Entity Name: BOATWRIGHT'S 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SADDLER, LORRAINE S
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: 14330 NE 203 AVE RD
City-St-Zip: FORT MC COY, FL 32134

Title: S () Delete
Name: HENDRIX, TERESA R
Address: 17180 NE 38TH LN RD
City-St-Zip: SILVER SPRINGS, FL 34488

Title: C () Delete
Name: GROFF, HAROLD E
Address: 16885 NE 141 COURT
City-St-Zip: FORT MC COY, FL 32134

Title: C () Delete
Name: SCHMIDTKE, JUDITH
Address: 16885 NE 141 COURT
City-St-Zip: FT MCCOY, 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: () Change () Addition
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Address:
City-St-Zip:

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 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: LORRAINE S SADLER

PRED

07/25/2006

Electronic Signature of Signing Officer or Director

Date