

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000062003

FILED
Apr 25, 2003
Secretary of State

Entity Name: TB TOWING & RECOVERY, INC.

Current Principal Place of Business:

4449 OLD WINTER GARDEN RD
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

P O BOX 616196
ORLANDO, FL 32861

New Mailing Address:

FEI Number: 27-0015266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

H & C DEVELOPMENT, INC.
4449 OLD WINTER GARDEN ROAD
ORLANDO, FL 32811

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: P () Delete
Name: TAYLOR, JOSEPH A
Address: 414 N JOHNS AVE
City-St-Zip: ORLANDO, FL 32805

Title: V () Delete
Name: MONTFORD, CAROL A
Address: 414 N JOHNS AVE
City-St-Zip: ORLANDO, FL 32805

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TAYLOR, JOSEPH A
Address: 5304 BALBOA DR
City-St-Zip: ORLANDO, FL 32808

Title: V (X) Change () Addition
Name: MONTFORD, CAROL A
Address: 5304 BALBOA DR
City-St-Zip: ORLANDO, FL 32808

Title: ST () Change (X) Addition
Name: H & C DEVELOPMENT, I, NC.
Address: 4449 OLD WINTER GARDEN RD
City-St-Zip: ORLANDO, FL 32811 US

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: COLLEEN M. BRAINARD

ST

04/25/2003

Electronic Signature of Signing Officer or Director

Date