2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2006 8:00 am
Secretary of State
01-23-2006 90038 043 ***150.00

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1. Entity Name
NATIONAL TOWING & TIRE SERVICES, INC.

Principal Place of Business	Mailing Address
490 COX ROAD COCOA, FL 32926	PO BOX 1621 COCOA, FL 32923

DO NOT WRITE IN THIS SPACE

01152006 No Chg-P CR2E034 (11/05)

4. FEI Number
01-0807001
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CASTETTER, CLAYTON
~~PO BOX 1621~~
~~COCOA, FL 32923~~
490, Cox Rd
Cocoa, FL. 32926.

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CASTETTER, CLAYTON
STREET ADDRESS	PO BOX 1621
CITY-ST-ZIP	COCOA, FL 32923
TITLE	VP
NAME	GRANSDEN, RICHARD
STREET ADDRESS	4501 PINE CONE PLACE
CITY-ST-ZIP	COCOA, FL 32926
TITLE	S
NAME	GRANSDEN, RICHARD
STREET ADDRESS	4501 PINE CONE PLACE
CITY-ST-ZIP	COCOA, FL 32926
TITLE	T
NAME	GRANSDEN, RICHARD
STREET ADDRESS	4501 PINE CONE PLACE
CITY-ST-ZIP	COCOA, FL 32926
TITLE	D
NAME	CASTETTER, CLAYTON
STREET ADDRESS	PO BOX 1621
CITY-ST-ZIP	COCOA, FL 32923
TITLE	D
NAME	GRANSDEN, RICHARD
STREET ADDRESS	4501 PINE CONE PLACE
CITY-ST-ZIP	COCOA, FL 32926

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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 607, 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.

SIGNATURE: _____ 1/17/06 321 639-3464
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #