

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000172277

Entity Name: TINY'S TOWING, INC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

1323 NEW HAMPSHIRE AVE
TAVARES, FL 32778

New Principal Place of Business:

3420 IDAMERE SHORES CT
TAVARES, FL 32778

Current Mailing Address:

P.O. BOX 923
TAVARES, FL 32778

New Mailing Address:

FEI Number: 87-0737701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSSON, RICHARD
1323 NEW HAMPSHIRE AVE
TAVARES, FL 32778 US

Name and Address of New Registered Agent:

COSSON, RICHARD
3420 IDAMERE SHORES CT
TAVARES, FL 32778 US

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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: COSSON, RICHARD
Address: 1323 NEW HAMPSHIRE AVE
City-St-Zip: TAVARES, FL 32778

Title: VP/D () Delete
Name: COSSON, PATRICIA
Address: 1323 NEW HAMPSHIRE AVE
City-St-Zip: TAVARES, FL 32778

Title: T/S () Delete
Name: COSSON, PATRICIA
Address: 1323 NEW HAMPSHIRE AVE
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: COSSON, RICHARD
Address: 3420 IDAMERE SHORES CT
City-St-Zip: TAVARES, FL 32778

Title: VP/D (X) Change () Addition
Name: COSSON, PATRICIA
Address: 3420 IDAMERE SHORES CT
City-St-Zip: TAVARES, FL 32778

Title: T/S (X) Change () Addition
Name: COSSON, PATRICIA
Address: 3420 IDAMERE SHORES CT
City-St-Zip: TAVARES, FL 32778

I hereby certify that the information supplied with this filing does not qualify 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: PATRICIA COSSON

V/P

04/30/2009

Electronic Signature of Signing Officer or Director

Date