## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000013269

Entity Name: JACKSONVILLE TIRE RESCUE, INCORPORATED

FILED Jan 23, 2012 Secretary of State

01/23/2012

**Current Principal Place of Business: New Principal Place of Business:** 

7010 LENOX AVENUE 7010 LENOX AVENUE

JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32205 US

**Current Mailing Address: New Mailing Address:** 

POST OFFICE BOX 6931 POST OFFICE BOX 6931

JACKSOVILLE, FL 322366931 JACKSONVILLE, FL 322366931 US

FEI Number: 20-4212506 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GREEN, JEREMIAH W GREEN, JEREMIAH 5805 PÓINT BAYOU 408 E BAY STREET

JACKSOVILLE, FL 322117028 US JACKSONVILLE, FL 32202 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: JEREMIAH W GREEN

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PSTD

Name: LUNDY, MARY A

POST OFFICE BOX 6931 Address:

City-St-Zip: JACKSONVILLE, FL 322366931 US

Title: DV Name:

LUNDY, JOHN R

POST OFFICE BOX 6931 Address:

JACKSONVILLE, FL 322366931 US City-St-Zip:

Title: DV

LUNDY, ZACKARY J Name: POST OFFICE BOX 6931 Address:

City-St-Zip: JACKSONVILLE, FL 322366931 US

I hereby 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 all other like empowered.

SIGNATURE: MARY ALICE LUNDY **PSTD** 01/23/2012