

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P06000037845

1. Entity Name  
SPECIALTY SALVAGE, INC.



FILED  
07 MAY -1 PM 2:44  
TALLAHASSEE, FLORIDA

Principal Place of Business  
1951 VALLEY CROSSING DR.  
JACKSONVILLE, FL 32221

Mailing Address  
1951 VALLEY CROSSING DR.  
JACKSONVILLE, FL 32221

2. Principal Place of Business - No P.O. Box #  
1951 Valley Crossing Dr.

3. Mailing Address  
Suite, Apt. #, etc.  
7952 Normandy Boulevard



04252007 Chg-P CR2E034 (12/06)

City & State  
Jacksonville, Florida

City & State  
Jacksonville, Florida

4. FEI Number  
56-2566407

Applied For  
Not Applicable

Zip  
32221

Country  
USA

Zip  
32221

Country  
USA

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

## 6. Name and Address of Current Registered Agent

GROSSO, BRUCE  
1951 VALLEY CROSSING DR.  
JACKSONVILLE, FL 32221

## 7. Name and Address of New Registered Agent

Name  
David R. Knapp  
Street Address (P.O. Box Number is Not Acceptable)  
1951 Valley Crossing Drive  
City Jacksonville FL Zip Code 32221

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 *David R. Knapp* David R. Knapp, Registered Agent 4/25/07  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when amending) DATE

Amended AR is \$61.25

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

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
GROSSO, BRUCE  
1951 VALLEY CROSSING DR.  
JACKSONVILLE, FL 32221 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
*MSA* ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTSD  
David R. Knapp  
1951 Valley Crossing Drive  
Jacksonville, FL 32221 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
800103045429  
05/23/07--01003--014 \*\*211.25 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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: *David R. Knapp* David R. Knapp 4/25/07 (904) 378-8380  
Signature and typed or printed name of signing officer or director Date Daytime Phone #