

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000009098

FILED
Jun 24, 2009
Secretary of State

Entity Name: PREMIER AUTO RECYCLING, INC.

Current Principal Place of Business:

4000 WHIDDEN CEMETARY ROAD
LAKE WALES, FL 33859 US

New Principal Place of Business:

4000 WHIDDEN CEMETARY ROAD
LAKE WALES, FL 33859 US

Current Mailing Address:

4000 WHIDDEN CEMETARY ROAD
LAKE WALES, FL 33859 US

New Mailing Address:

4000 WHIDDEN CEMETARY ROAD
LAKE WALES, FL 33859 US

FEI Number: 20-8278048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOFIELD AND SPENCER, P. A.
1429 60TH AVENUE WEST
SUITE 300
BRADENTON, FL 34207 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: MOSCHETTO, THOMAS E
Address: 3204 SPRING LAKE ROAD
City-St-Zip: LAKE WALES, FL 33898 US

Title: VP,D () Delete
Name: ALLIGOOD, BRIAN D
Address: 5430 LAKESIDE DRIVE
City-St-Zip: LAKE WALES, FL 33853 US

Title: T,D () Delete
Name: COSTIN, RYAN D
Address: 815 CHAMBERLAIN LOOP
City-St-Zip: LAKE WALES, FL 33853 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP,D (X) Change () Addition
Name: ALLIGOOD, BRIAN D
Address: 954 HIGHLAND CREST CIRCLE
City-St-Zip: LAKE WALES, FL 33853 US

Title: T,D (X) Change () Addition
Name: COSTIN, RYAN D
Address: 815 CHAMBERLAIN LOOP
City-St-Zip: LAKE WALES, FL 33853 US

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: BRIAN O. ALLIGOOD

VP

06/24/2009

Electronic Signature of Signing Officer or Director

Date