

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000050210

FILED
Apr 01, 2009
Secretary of State

Entity Name: PINEYWOODS TOWING, RECOVERY, & TRANSPORT, INCORPORATED

Current Principal Place of Business:

1373 SW BELLEVUE AVE
PORT ST LUCIE, FL 34953 US

New Principal Place of Business:

3625 PLEASANT ACRES RD
FORT PIERCE, FL 34982 US

Current Mailing Address:

PO BOX 880606
PORT ST LUCIE, FL 349880606 US

New Mailing Address:

FEI Number: 75-3240238 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HUBBARD, JEFFREY A
1373 SW BELLEVUE AVE
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

HUBBARD, JEFFREY A
3625 PLEASANT ACRES RD
FORT PIERCE, FL 34982 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: JEFFREY A HUBBARD JR

04/01/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUBBARD, JEFFREY A
Address: 1373 SW BELLEVUE AVE
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: VP () Delete
Name: HUBBARD, MEGAN J
Address: 1373 SW BELLEVUE AVE
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HUBBARD, JEFFREY A
Address: 3625 PLEASANT ACRES RD
City-St-Zip: FORT PIERCE, FL 34982 US

Title: VP (X) Change () Addition
Name: THOMAS, JOSHUA T
Address: 3625 PLEASANT ACRES RD
City-St-Zip: FORT PIERCE, FL 34982 US

Title: T/S () Change (X) Addition
Name: HUBBARD, MEGAN J
Address: 3625 PLEASANT ACRES RD
City-St-Zip: FORT PIERCE, FL 34982

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: MEGAN J HUBBARD

T/S

04/01/2009

Electronic Signature of Signing Officer or Director

Date