## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000115277

Entity Name: R/S TOWING & RECOVERY INC.

FILED Jan 18, 2009 Secretary of State

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

2309 HANCOCK BRIDGE PKWY CAPE CORAL, FL 33990

Current Mailing Address: New Mailing Address:

2309 HANCOCK BRIDGE PKWY CAPE CORAL, FL 33990

FEI Number: 26-1267391 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:

BOKESCH, ERIC L
2309 HANCOCK BRIDGE PKWY
CAPE CORAL, FL 33990 US
FRIGA, SCOTT
2309 HANCOCK BRIDGE PKWY
CAPE CORAL, FL 33990 US
CAPE CORAL, FL 33990 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: SACOTT FRIGA 01/18/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

CAPE CORAL, FL 33990

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP ( ) Delete Title: PRE (X) Change ( ) Addition

Name: BOKESCH, ERIC L Name: SCOTT, FRIGA

Address: 2309 HANCOCK BRIDGE PKWY
Address: 2309 HANCOCK BRIDGE PKWY

City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: CAPE CORAL, FL 33990

Title: P (X) Delete Title: ( ) Change ( ) Addition

 Name:
 HOLLIDAY, COLLEEN S
 Name:

 Address:
 2309 HANCOCK BRIDGE PKWY
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33990
 City-St-Zip:

Title: SEC (X) Delete Title: ( ) Change ( ) Addition

Name: FRIGA, SCOTT Name:
Address: 2309 HANCOCK BRIDGE PKWY Address:

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.

City-St-Zip:

SIGNATURE: SCOTT FRIGA PRE 01/18/2009