

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P93000038472

Entity Name: LAKE PARK TOWING, INC.

FILED
Oct 07, 2009
Secretary of State

Current Principal Place of Business:

803 13TH ST
LAKE PARK, FL 33403 US

Current Mailing Address:

803 13TH ST
LAKE PARK, FL 33403 US

New Principal Place of Business:

801 15TH STREET
SUITE 1
LAKE PARK, FL 33403 US

New Mailing Address:

801 15TH STREET
SUITE 1
LAKE PARK, FL 33403 US

FEI Number: 65-0413151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRUGER, ALLAN I CPA
C/O KRUGER & ASSOCIATES, PA
6612 PARKSIDE DRIVE
PARKLAND, FL 33067 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: ALLEN KRUGER

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: DPT () Delete
Name: GADOURY, KATHRYN
Address: 825 ELM ROAD
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VPS () Delete
Name: GADOURY, THOMAS
Address: 825 ELM ROAD
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VP (X) Delete
Name: GRIBBLE, JAMES
Address: 1525 GALLOP DRIVE
City-St-Zip: LOXAHACTEE, FL 33470 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: KATHRYN GADOURY

OWNE

10/07/2009

Electronic Signature of Signing Officer or Director

Date