

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY 16 AM 8:17

DOCUMENT # P94000012950 (9)

1. Corporation Name

BALL'S WRECKER SERVICE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

2104 HIGHWAY 17 SOUTH
BARTOW FL 33830

2104 HIGHWAY 17 SOUTH
BARTOW FL 33830

3. Date Incorporated or Qualified

3a. Date of Last Report

02/14/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21

26

59-2975242

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$6.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

23

28

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes

No

24

Country

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BALL, GARY
2104 HIGHWAY 17 SOUTH
BARTOW FL 33830**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Fred Ball

2-29-95

Signature (print or printed name of registered agent and title, if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	BALL, FRED
STREET ADDRESS	2104 HWY 17 SOUTH
CITY - ST - ZIP	BARTOW FL 33830
TITLE	D
NAME	BALL, GARY
STREET ADDRESS	332 ELLIOTT RD.
CITY - ST - ZIP	BARTOW FL 33830
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	
7.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
7.2 NAME	
7.3 STREET ADDRESS	
7.4 CITY - ST - ZIP	
8.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
8.2 NAME	
8.3 STREET ADDRESS	
8.4 CITY - ST - ZIP	
9.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
9.2 NAME	
9.3 STREET ADDRESS	
9.4 CITY - ST - ZIP	
10.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10.2 NAME	
10.3 STREET ADDRESS	
10.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(h), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

Fred Ball
FRED BALL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-29-95

Date

(System Use Only)