## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000027116

Entity Name: ELITE TOWING, INC.

City-St-Zip:

CASSELBERRY, FL

FILED Mar 24, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1580 SOUTH CR. 427 102 CASHEW CT LONGWOOD, FL 32750 US LONGWOOD, FL 32750 US **Current Mailing Address: New Mailing Address:** P.O. BOX 521356 LONGWOOD, FL 32752 US FEI Number: 59-3233070 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: FLOWER, BRUCE W 511 NORTH MAITLAND AVE. SUITE 5 MAITLAND, FL 32751 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition STOOPS, LOWELL Name: Name: 102 CASHEW CT Address: Address: City-St-Zip: LONGWOOD, FL City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: WARFIELD, GARRETT W. Name: 423 FOREST PARK Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Ρ SIGNATURE: LOWELL STOOPS 03/24/2004