## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000058083

Entity Name: AUTO RECOVERY SERVICE, INC.

FILED Apr 12, 2006 Secretary of State

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

4201 SW 60 AVE

FT LAUDERDALE, FL 33314 US

**Current Mailing Address: New Mailing Address:** 

P O BOX 120277

FT LAUDERDALE, FL 33312 US

FEI Number: 65-0681694 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

LONDON, MARK S

GARNER, BILL M 4030-C SHERIDAN STREET 1610 W OAK KNOLL CIRCLE HOLLYWOOD, FL 33021 DAVIE, FL 33324

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: BILL M GARNER 04/12/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

GARNER, BILL M Name: Name: GARNER, BILL M P O BOX 120277 P O BOX 120277 Address: Address:

City-St-Zip: PLANTATION, FL 333120277 City-St-Zip: FT LAUDERDALE, FL 333120277

Title: VΡ Title: VPD () Delete (X) Change ( ) Addition

Name: HURST, DOUG Name: HURST, DOUG P O BOX 120277 P O BOX 120277 Address: Address:

PLANTATION, FL 333120277 FT LAUDERDALE, FL 333120277 City-St-Zip: City-St-Zip:

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

HURST, JULIE HURST, JULIE Name: Name: PO BOX 120277 PO BOX 120277 Address: Address:

City-St-Zip: PLANTATION, FL 333120277 City-St-Zip: FT LAUDERDALE, FL 333120277

I hereby certify that the information supplied with this filing does not qualify for the 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: BILL M. GARNER PDS 04/12/2006