

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000103329

Entity Name: TOMOKA SALVAGE, INC.

FILED  
Apr 30, 2012  
Secretary of State

**Current Principal Place of Business:**

1429 PECOS DRIVE  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

1429 PECOS DRIVE  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 59-3420538

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CINELLI, JAMES  
1429 PECOS DRIVE  
ORMOND BEACH, FL 32174 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P, D  
Name: CINELLI, JAMES  
Address: 1429 PECOS DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP T  
Name: CINELLI, JOHN JR  
Address: 1201 OAK FOREST  
City-St-Zip: ORMOND BEACH, FL 32174

Title: S  
Name: CINELLI, LYNNE  
Address: 1429 PECOS DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

I hereby 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 all other like empowered.

SIGNATURE: JAMES V CINELLI

P

04/30/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date