

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90181 027 ***150.00

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DOCUMENT # P98000010771

1. Entity Name
ATO TOWING, INC.



Principal Place of Business
WPB
BAY 32
WEST PALM BEACH FL 33416

Mailing Address
7153 SOUTHERN BLVD
BAY 32
WEST PALM BEACH FL 33416



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0882748

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALLISON, ROGER
11131 67TH PLACE NORTH
ROYAL PALM BEACH FL 33411

Name WAYNE OTT
Street Address (P.O. Box Number is Not Acceptable)
11352 49 ST. NO.
ROYAL PALM Bch. FL
City FL Zip Code 33411

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Wayne Ott

4-10-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** Delete
NAME ALLISON, ROGER
STREET ADDRESS 11131 67TH PLACE NORTH
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE **D** Change Addition
NAME OTT WAYNE
STREET ADDRESS 11352 49 ST. NO.
CITY-ST-ZIP ROYAL PALM Bch. FL. 33411

TITLE **ST** Delete
NAME ALLISON, JOYCE
STREET ADDRESS 11131 67TH PLACE NORTH
CITY-ST-ZIP ROYAL PALM BEACH FL 33412

TITLE **VPD** Change Addition
NAME OTT LINDA
STREET ADDRESS 11352 49 ST. NO.
CITY-ST-ZIP ROYAL PALM Bch FL. 33411

TITLE **VPD** Delete
NAME OTT, WAYNE
STREET ADDRESS 11352 49TH ST N.
CITY-ST-ZIP ROYAL PALM Bch FL 33411

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** Delete
NAME OTT, LINDA
STREET ADDRESS 11352 49TH ST N.
CITY-ST-ZIP ROYAL PALM Bch FL 33411

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wayne Ott
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-03 5686837704

Date Daytime Phone #

CR2E034 (10/02)