## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

## DOCUMENT # P98000032122

1. Entity Name

BILL'S TOWING AND RECOVERY INC. OF JAX.



FILED Jan 14, 2003 8:00 am Secretary of State

01-14-2003 90077 026 \*\*\*150.00

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Principal Place of Business Mailing Address 7701 HAMMOND BLVD. 7701 HAMMOND BLVD.														
JACKSONVILLE FL 322	JACKSONVILLE FL 32220 JACKSONVILLE FL 32220						1.1			11 <b>0</b> 110 <b>0</b> 1 110	1 <b>0</b> 14 <b>0</b> 10 (104 100)			
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2. Principal Place of Business 3. Mailing Address SAME								ikasibat iin toini laist noisi häili	BEIR BBIBE III	14 14 14 14 14 14 14 14 14 14 14 14 14 1	10 14040 (101 100)			
Suite, Apt. #, etc. Suite, Apt. #, etc.							☐ CHECK HERE IF MAKING CHANGES							
City & State City & State					<del>-,</del>			59-3505464						
7/p 32220	Country	Zip		Coun	try		5. Certifi	cate of Status Desired	□ <b>\$</b>	<b>8.75</b> A	dditional			
6. N	ame and Address of Current R	egistere	d Agent				.7Name	and Address of New Re	gistered A	gent -				
WARDOUR MILLIAN Z. ID					Name					Applied For Not Applicable  \$8.75 Additional Fee Required  Provided For Not Applicable  The Required  For Required				
Wardrup, William z Jr. 7701 Hammond Blvd.					Street Address (P.O. Box Number is Not Acceptable)									
JACKSONVILLE F											· · · · · · · · · · · · · · · · · · ·			
UNCHOCIVILLE I	L 02210				City					T 7:- 0				
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<ol> <li>The above named the obligations of re</li> </ol>	entity submits this statement for a egistered agent.	the purp	ose of changing its re	gistere	ed office or re	gistere	d agent, o	r both, in the State of Flori	da. I am fa	miliar wit	h, and accept			
	.g.(1.12.00 a.g.(1.11)													
SIGNATURE Signature, t	typed or printed name of registered agent an	d title if app	licable. (NOTE: I	Registere	d Agent signature r	equired w	hen reinstatin	g)	DATE					
FILE NO	W!!! FEE IS \$150.00		#17L											
After May 1, 2003 Fee will be \$550.00						9. Election Campaign Financing \$5.0				.00 May Be				
Make Check Payabl	e to Florida Department of S	State						must rund Contribution.	ш	Add	ed to Fees			
10.	OFFICERS AND D	IRECTO		11.			ADDITIO	NS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 11			
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	ONVILLE FL 32210			CITY-	-ST-ZIP		•							
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NAME WARDS	RUP, WILLIAM Z JR.			NAME	ľ									
	AMMOND BLVD.				ET ADDRESS ST-ZIP									
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01117317211				■ CHY-	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.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICIR OF ORECTOR

☐ Delete

☐ Delete

· P WILLIAM Z

1/5/2003

783-2003

Daytime Phone #

Change

☐ Change

☐ Addition

Addition