

FILED

Aug 27, 2007 8:00 am
Secretary of State

08-08-2007 90069 003 ***150.00

FROM :

FAX NO. :

8.

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000025610		
1. Entity Name PERFORMANCE TOWING, INC., OF ORLANDO		
Principal Place of Business 845 N. MILLS AVE. ORLANDO, FL 32803	Mailing Address 845 N MILLS AVE. ORLANDO, FL 32803	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent FOURNIER, ROBERT 845 N. MILLS AVE. ORLANDO, FL 32803		DO NOT WRITE IN THIS SPACE
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, the registered agent. SIGNATURE <i>Elaine Fournier</i> <i>President Robert Fournier</i> 8/21/07 (If signed, typed or printed name of not correct agent and use if applicable) (NOTE: Registered Agent signature required when indicating) DATE		
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FOURNIER, ELAINE 845 N. MILLS AVE. ORLANDO, FL 32803	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FOURNIER, ROBERT 845 N. MILLS AVE. ORLANDO, FL 32803	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FOURNIER, ROBERT A JR 845 N MILLS AVE ORLANDO, FL 32803	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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08012007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3567521	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

CIC 8127

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 115, 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.

Robert Fournier 8/21/07