

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S05984

FILED  
Aug 23, 2010  
Secretary of State

**Entity Name:** JIMMIES WRECKER SERVICE INC.

**Current Principal Place of Business:**

9032 US 1 N OR NEW KINGS ROAD  
JACKSONVILLE, FL 32219 US

**New Principal Place of Business:**

**Current Mailing Address:**

9032 US 1 N OR NEW KINGS ROAD  
JACKSONVILLE, FL 32219 US

**New Mailing Address:**

10826 CREATIVE DRIVE  
JACKSONVILLE, FL 32218 US

**FEI Number:** 59-3037441

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRAWFORD, JACKQUELYN  
9032 US 1 N OR NEW KINGS ROAD  
JACKSONVILLE, FL 32219 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:** D&O  
**Name:** CRAWFORD, MCKINLEY E.  
**Address:** 10826 CREATIVE DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32218 US

**Title:** D&O  
**Name:** CRAWFORD, JACKQUELYN B.  
**Address:** 10826 CREATIVE DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32218 US

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:** MCKINLEY E CRAWFORD

D&O

08/23/2010

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

\_\_\_\_\_  
Date