

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S74523

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: AMERICAN EAGLE WRECKER SERVICE, INC.

Current Principal Place of Business:

902 BLOUNTSTOWN HWY.
TALLAHASSEE, FL 32304 US

New Principal Place of Business:

Current Mailing Address:

5400 TRANQUILITY PLACE
TALLAHASSEE, FL 32310 US

New Mailing Address:

FEI Number: 59-3105901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARSH, CLIFF
5400 TRANQUILITY PLACE
TALLAHASSEE, FL 32310 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARSH, LISA VOTH
Address: 902 BLOUNTSTOWN HWY.
City-St-Zip: TALLAHASSEE, FL 32304 US

Title: V () Delete
Name: MARSH, CLIFF
Address: 902 BLOUNTSTOWN HWY.
City-St-Zip: TALLAHASSEE, FL 32304 US

Title: T () Delete
Name: MARSH, CECIL LEGETTE
Address: 1443 VAN DELIA
City-St-Zip: TALLAHASSEE, FL 32310 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V/P (X) Change () Addition
Name: MARSH, LISA V
Address: 902 BLOUNTSTOWN HWY.
City-St-Zip: TALLAHASSEE, FL 32304 US

Title: P (X) Change () Addition
Name: MARSH, CLIFF L
Address: 902 BLOUNTSTOWN HWY.
City-St-Zip: TALLAHASSEE, FL 32304 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: MARSH, SUSAN L
Address: 2599 CHARLES MCINTOSH RD.
City-St-Zip: TALLAHASSEE, FL 32310 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CLIFF L. MARSH

P

04/30/2002

Electronic Signature of Signing Officer or Director

Date