

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S74523

FILED
Apr 29, 2005
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAKER, JOHN A
Address: 1138 FERWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32304

Title: C () Delete
Name: MARSH, CLIFF L
Address: 5400 TRANQUILITY PLACE
City-St-Zip: TALLAHASSEE, FL 32310

Title: V () Delete
Name: MARSH, BRUCE L
Address: 1443 VANDELIA RD.
City-St-Zip: TALLAHASSEE, FL 32310

Title: D () Delete
Name: GIAIMO, GREGORY
Address: 2765 W. THARPE ST.
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: ROTTMAN, JAMES A
Address: 2354 EMERALD RIDGE LOOP
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: GIAIMO, MICHAEL S
Address: 2616 W. THARPE ST.
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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 MARSH

C

04/29/2005

Electronic Signature of Signing Officer or Director

Date