2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V39295

FILED Apr 08, 2008 Secretary of State

Entity Name: LAKE JACKSON TOWING, WRECKER AND ACCIDENT RECOVERY, INC.

Current Principal Place of Business: New Principal Place of Business: 5505 TOWER ROAD TALLAHASSEE, FL 32303 **Current Mailing Address: New Mailing Address:** 5505 TOWER ROAD TALLAHASSEE, FL 32303 FEI Number: 59-3124628 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHESTER, GLORIA J 78 BRUNSON ROAD QUINCY, FL 32351 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CHESTER, LESTER A Name: Name: 78 BRUNSON ROAD Address: Address: City-St-Zip: QUINCY, FL 32351 US City-St-Zip: VΡ Title: Title: () Delete (X) Change () Addition Name: CHESTER, GLORIA J Name: DELOACH, ROBBIE R 78 BRUNSON ROAD 8087 BABY FARM ROAD Address: Address: TALLAHASSEE, FL 32310 US City-St-Zip: QUINCY, FL 32351 US City-St-Zip: () Delete Title: (X) Change () Addition VΡ Title: VΡ CHESTER, LARRY G CHESTER, LARRY G Name: Name: P.O. BOX 181033 78 BRUNSON ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL 32399 US City-St-Zip: TALLAHASSEE, FL 32351 US Title: () Delete Title: SEC (X) Change () Addition CHESTER, JASON D CHESTER, JASON D Name: Name: Address: 5510 BLACK BASS PASS Address: 5510 BLACK BASS PASS City-St-Zip: TALLAHASSEE, FL 32303 US City-St-Zip: TALLAHASSEE, FL 32303 US Title: Title: () Delete () Change (X) Addition CHESTER, GLORIA J Name: Name: Address: 78 BRUNSON ROAD Address: City-St-Zip: City-St-Zip: QUINCY, FL 32351

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GLORIA J CHESTER TR 04/08/2008