

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111044

Entity Name: A & M RECOVERY SERVICES, INC.

Current Principal Place of Business:

308 S THOMPSON STREET
STARKE, FL 32091

Current Mailing Address:

308 S THOMPSON STREET
STARKE, FL 32091

FEI Number: 47-0894842

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRICKLAND, MARK
5001 S.W. CR. 100A
STARKE, FL 32091 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

Officer/Director Detail :

Title DP
Name STRICKLAND, IRA A
Address 6202 KINGLSEY LAKE DR.
City-State-Zip: STARKE FL 32091

Title DV
Name STRICKLAND, MARK A
Address 5001 S.W. CR. 100A
City-State-Zip: STARKE FL 32091

Title DV
Name STRICKLAND, SUZANNE B
Address 6202 KINGSLEY LAKE DR.
City-State-Zip: STARKE FL 32091

Title DT
Name STRICKLAND, DAWN
Address 5001 SW CR. 100A
City-State-Zip: STARKE FL 32091

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: IRA A STRICKLAND

PRES

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date