


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000123531


1. Entity Name
 A-LIGHTNING TOWING OF THE PALM BEACHES, INC.



Principal Place of Business
 14618 63RD CT. N
 LOXAHATCHEE, FL 33470

Mailing Address
 14618 63RD CT. N
 LOXAHATCHEE, FL 33470

DO NOT WRITE IN THIS SPACE



08122008 No Chg-P CR2E034 (11/05)

4. FEI Number: 20-5627286	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEE, DEBORAH A
 14618 63RD CT N
 LOXAHATCHEE, FL 33470

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating)

U00000957725
 08/14/08-80004-010 150.00

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P/D
NAME	LEE, DEBORAH A
STREET ADDRESS	14618 63RD CT. N
CITY-ST-ZIP	LOXAHATCHEE, FL 33470
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Deborah A. Yew Date: 8.12.2008 Daytime Phone #: 561-784-0054

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR