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Mar 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 282963 (8)

1. Corporation Name
MCGEE TIRE STORES, INC.

Principal Place of Business	Mailing Address
320 W MAIN STREET P.O. BOX 6007 LAKELAND FL 33801 US	P O BOX 6007 P.O. BOX 6007 LAKELAND FL 33807-6007 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/01/1964

2. Principal Place of Business	2a. Mailing Address
21 2636 Lasso Lane	26 P.O. Box 2230
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Lakeland FL	28 City & State: Eaton Park FL
24 Zip: 33801 25 Country: USA	29 Zip: 33840 30 Country: USA

4. FEI Number: 59-1052787 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MCGEE, JOHN J. 3803 OLD HWY 37 #100 LAKELAND FL 33813	81 Name: Cynthia McGee 82 Street Address (P.O. Box Number Is Not Acceptable) 83 2636 LASSO LANE 84 City: Lakeland FL 85 Zip Code: 33840

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Cynthia McGee — Cynthia McGee — 3/20/98
Signature, typed & printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MCGEE, JOHN J		1.2 NAME	
STREET ADDRESS	3803 OLD HWY 37 #100		1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND, FL 0		1.4 CITY-ST-ZIP	
TITLE	STD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MCGEE, CYNTHIA L.		2.2 NAME	
STREET ADDRESS	308 HAWICK LANE		2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL		2.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MCGEE, TERRANCE J		3.2 NAME	
STREET ADDRESS	5716 EMERALD RIDGE BLVD		3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND, FL 0		3.4 CITY-ST-ZIP	
TITLE	PD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MCGEE, MICHAEL J		4.2 NAME	
STREET ADDRESS	5022 LAKE IN THE WOODS BLVD		4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND, FL 0		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Cynthia McGee — 3/20/98 — 941-667-3702