FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 439072 1. Corporation Name

LARRY DIMMITT CADILLAC, INC.

Principal Flace	or Dualificas	maining / taar coo							
25191 US 19 N		25191 US 19 N	25191 US 19 N CLEARWATER FL 33763			•			
CLEARWATER F	L 33763	CLEARWATER FL 33763				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed		, o. r.o.	
	•					1	,		
·						10/30/1973 4. FEI Number		-	olied For
2. Principal Place of Business 2a. Mailing Address						1 "		<u> </u>	
21	•	26				59-1109554			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 A Fee Re	
22	,	27							·
City & State	e	City & State	City & State			6 Election Campaign Financing	П	\$5.00	•
23		28				Trust Fund Contribution		Added to	o Fees
Zip	Country	Zip	_ Counti	ry		8. This corporation owes the cur	rent year In		_
24	25	29 3	0			Personal Property Tax.			□No
<u></u>	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New	Registered	Agent	
	78 July 28 78 78 4	<u>.</u>	8	1	Name	•		,	
KINSELLA, CHRISTINA J			-	2	Stroot Addre	ess (P.O. Box Number is Not Accep	table)		
2519	1 US 19 N		82 Street Ad			FIRE CONTRACTOR FOR CONTRACTOR	#.5 · # 7 vie	Name of the control	ne gjeggerezi
CLEARWATER FL 33763			8	3					
	•		8	4	City		<u></u>	85 Zip C	ode
<u>च्याच्छ ६० स्ट्रा</u>	1					L' b - it- this statement for th	- DUITDOSO O	f changing its	registered
					nameo corpo ne corporatio	oration submits this statement for the on's board of directors. I hereby acce	ept the appo	intment as re	gistered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Florid	la Statute	es.	•				
SIGNATURE	Write Formsch	- Control				/	- 9 - 9 DATE	7	
GIGHTIGHE	Signature, typed or printed name of registered ag	· · · · · · · · · · · · · · · · · · ·	<u> </u>	ent s	signature required				DC IN 12
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO O	FFICERS A	Change	Addition
TITLE	CVT	☐ DELETE	1.1 TITLE					Change	☐ Addition
NAME	DIMMITT, RICHARD R		1.2 NAME	E					
STREET ADDRESS	25191 US 19 N		1.3 STRE	ET A	DDRESS				
CITY-ST-ZIP	CLEARWATER FL 33763		1.4 CITY	-ST-2	ZIP				
TITLE	P	☐ DELETE	2.1 TITLE	Ξ.				Change	☐ Addition
NAME	DOHERTY, JOHN R		2.2 NAMI	Е					
STREET ADDRESS	25191 US 19 N		2.3 STRE	EET A	ODRESS				
	CLEARWATER FL 33763	•	2. 4 CFTY			. "			
CITY-ST-ZIP	CLEATHAILETT E COTOC	. □ DELETE	3.1 TITLE					Change	Addition
			3.2 NAM						
NAME	图数 特别。		1		ADDRESS		5 5 3 1 1 1 1 1 1		e real terms
STREET ADDRESS	ARVATES AL 1977		1		- 1				
CITY-ST-ZIP		(") DELETE	3.4. CITY		ZIP		354 A \$19	Change	• 🖸 Addition
TILE .		□ pere₁e	4.1 TITLE				•		
NAME , and		1.20	4. 2 NAM						•
STREET ADDRESS	£ 6.00	÷			NODRESS				
CITY-ST-ZIP			4.4 CITY		ZIP		···	[***] C+	□ # J J isia -
TITLE		☐ DELETE	5.1 TITLE			5 5		Change	☐ Addition
NAME			5.2 NAM	E		A 18 18 18			
STREET ADDRESS			5.3 STR	EETA	ADDRESS	•			
CITY-ST-ZIP	O.F.		5.4 CITY	·ST-2	ZIP				<u> </u>
TITLE	52 6 Rept + 8 1 1 4 15	☐ DELETE	6.1 TITLE	E				Change	☐ Addition
	25(6) 1.2	_	62 NAM	:F	1				

CITY-ST-ZIP 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

6.4 CITY-ST-ZIP

STREET ADDRESS

FILED

Jan 26, 1999 8:00am

Secretary of State

01-26-1999 90053 035 ***150.00

CR2E034 (11/98)