

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 512229

(6)

1. Corporation Name

GLUECK'S AUTO PARTS, INC.



Principal Place of Business

4801 PREYMORE STREET
OSPREY FL 34229-5832

Mailing Address

4801 PREYMORE STREET
OSPREY FL 34229-5832

3. Date Incorporated or Qualified
09/14/1976

3a. Date of Last Report
01/27/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-1770322

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GLUECK, ALBERT JR.
3610 TORREY PINES WAY
SARASOTA FL 34238

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and state if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P
GLUECK, ALBERT JR.
3610 TORREY PINES WAY
SARASOTA FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

ST
GLUECK, HELEN D.
3610 TORREY PINES WAY
SARASOTA FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V
JEFFERSON, ROBERT E.
810 BENEVA ROAD
SARASOTA FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V
GLUECK, ALBERT III
3610 TORREY PINES WAY
SARASOTA FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

S
KICS, ANGELA G
331 PATTERSON AVE
OPPREY FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

S
KAUFMAN, BRANDY G
4642 SPAHN ST
SARASOTA FL

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP ☒ Change ☐ Addition

6.1 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP ☐ Change ☐ Addition

7.1 TITLE 72 NAME 73 STREET ADDRESS 74 CITY-ST-ZIP ☐ Change ☐ Addition

8.1 TITLE 82 NAME 83 STREET ADDRESS 84 CITY-ST-ZIP ☐ Change ☐ Addition

9.1 TITLE 92 NAME 93 STREET ADDRESS 94 CITY-ST-ZIP ☐ Change ☐ Addition

10.1 TITLE 102 NAME 103 STREET ADDRESS 104 CITY-ST-ZIP ☐ Change ☐ Addition

11.1 TITLE 112 NAME 113 STREET ADDRESS 114 CITY-ST-ZIP ☐ Change ☐ Addition

12.1 TITLE 122 NAME 123 STREET ADDRESS 124 CITY-ST-ZIP ☐ Change ☐ Addition

13.1 TITLE 132 NAME 133 STREET ADDRESS 134 CITY-ST-ZIP ☐ Change ☐ Addition

14.1 TITLE 142 NAME 143 STREET ADDRESS 144 CITY-ST-ZIP ☐ Change ☐ Addition

15.1 TITLE 152 NAME 153 STREET ADDRESS 154 CITY-ST-ZIP ☐ Change ☐ Addition

16.1 TITLE 162 NAME 163 STREET ADDRESS 164 CITY-ST-ZIP ☐ Change ☐ Addition

17.1 TITLE 172 NAME 173 STREET ADDRESS 174 CITY-ST-ZIP ☐ Change ☐ Addition

18.1 TITLE 182 NAME 183 STREET ADDRESS 184 CITY-ST-ZIP ☐ Change ☐ Addition

19.1 TITLE 192 NAME 193 STREET ADDRESS 194 CITY-ST-ZIP ☐ Change ☐ Addition

20.1 TITLE 202 NAME 203 STREET ADDRESS 204 CITY-ST-ZIP ☐ Change ☐ Addition

21.1 TITLE 212 NAME 213 STREET ADDRESS 214 CITY-ST-ZIP ☐ Change ☐ Addition

22.1 TITLE 222 NAME 223 STREET ADDRESS 224 CITY-ST-ZIP ☐ Change ☐ Addition

23.1 TITLE 232 NAME 233 STREET ADDRESS 234 CITY-ST-ZIP ☐ Change ☐ Addition

24.1 TITLE 242 NAME 243 STREET ADDRESS 244 CITY-ST-ZIP ☐ Change ☐ Addition

25.1 TITLE 252 NAME 253 STREET ADDRESS 254 CITY-ST-ZIP ☐ Change ☐ Addition

26.1 TITLE 262 NAME 263 STREET ADDRESS 264 CITY-ST-ZIP ☐ Change ☐ Addition

27.1 TITLE 272 NAME 273 STREET ADDRESS 274 CITY-ST-ZIP ☐ Change ☐ Addition

28.1 TITLE 282 NAME 283 STREET ADDRESS 284 CITY-ST-ZIP ☐ Change ☐ Addition

29.1 TITLE 292 NAME 293 STREET ADDRESS 294 CITY-ST-ZIP ☐ Change ☐ Addition

30.1 TITLE 302 NAME 303 STREET ADDRESS 304 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Helen D Glueck S/T
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

19 January 96 (941) 966-5555
Date Daytime Phone #

CR2E034 (12/95)