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**Mar 06, 1999 8:00 am**  
**Secretary of State**

03-06-1999 90075 001 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **K58137**

1. Corporation Name  
**BAKER PARTS AND SUPPLY, INC**



Principal Place of Business  
**1304 GEORGIA AVE**  
**BAKER FL 32531**  
**US**

Mailing Address  
**PO BOX 157**  
**BAKER FL 32531**  
**US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**01/13/1989**

4. FEI Number  
**59-2925982**

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 owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business  
**21**

2a. Mailing Address  
**26**

Suite, Apt. #, etc.  
**22**

Suite, Apt. #, etc.  
**27**

City & State  
**23**

City & State  
**28**

Zip Country  
**24** **25**

Zip Country  
**29** **30**

9. Name and Address of Current Registered Agent  
**BRUNSON, JOSEPH M.**  
**CORNER OF 16TH ST. AND MONROE AVENUE**  
**BAKER FL 32536**

10. Name and Address of New Registered Agent

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE  DELETE  
 NAME **DCI BRUNSON, JOSEPH M.**  
 STREET ADDRESS **5760 MONROE STREET**  
 CITY-ST-ZIP **BAKER FL**

TITLE  DELETE  
 NAME **DV BRUNSON, WILLIAM D.**  
 STREET ADDRESS **295 EDGEWOOD PLACE**  
 CITY-ST-ZIP **CRESTVIEW FL**

TITLE  DELETE  
 NAME **DS BRUNSON, ROCHELLE**  
 STREET ADDRESS **5760 MONROE STREET**  
 CITY-ST-ZIP **BAKER FL**

TITLE  DELETE

TITLE  DELETE

TITLE  DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rochelle Brunson* **Rochelle Brunson** 2/26/99 850 537 3131

CR2E034 (11/98)