

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90033 007 ***150.00

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1. Entity Name
**WALLACE AUTOMOTIVE MANAGEMENT
CORPORATION, INC.**



Principal Place of Business
**3801 S.E. FEDERAL HIGHWAY
STUART, FL 34997**

Mailing Address
**3801 S.E. FEDERAL HIGHWAY
STUART, FL 34997**

94023494



01192004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1094139

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**WALLACE, WILLIAM L
3801 SE FEDERAL HWY
STUART, FL 34997**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
D
NAME
WALLACE, WILLIAM L
STREET ADDRESS
3801 S.E. FEDERAL HIGHWAY
CITY-ST-ZIP
STUART, FL 34997

TITLE
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CITY-ST-ZIP

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IN THIS SPACE**

12. 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 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 any other like empowered.

SIGNATURE:

Judith L. Powell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/04 **772-283-6000**
Date Daytime Phone # **X228**