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PROFIT CORPORATION ANNUAL REPORT



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

1996

STREET ADDRESS

CITY-ST-ZIF

P93000047207 (4) **DOCUMENT #** DON OLSON TRUCK TIRE CENTERS, INC. Principal Place of Business Mailing Address 2021 SUNNYDALE BLVD 2021 SUNNYDALE BLVD **CLEARWATER FL 34625** CLEARWATER FL 34625 3. Date Incorporated or Qualified 3a. Date of Last Report 07/07/1993 05/01/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3190633 21 26 Not Applicable Suite. Apt. #. etc. Suite, Apl. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 28 Trust Fund Contribution Added to Fees Country Ζıρ Zιο Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 25 Florida Statutes Yes No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MORGAN, LARRY C 82 Street Address (P.O. Box Number is Not Acceptable) 2021 SUNNYDALE BLVD. **CLEARWATER FL 34625** 83 Zip Code 84 City 85 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 poard of directors. Thereby accept the appointment as registered agent. I amfamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE Signation type disciplated name of registered agree as in the diagraphics (NOTE: By gishron Agost signature required when no eaching 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DVST DELETE 1 1 TITLE Change Add tion MORGAN, LARRY C NAME 1.2 NAME CR2E034 2021 SUNNYDALE BLVD STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL 34625** CITY - ST - ZIF 1.4 CITY - \$1 - ZIP TITLE DΡ DELETE 2 1 TITLE Change Addition MCLANE, JOHN 2.2 NAME 2021 SUNNYDALE BLVD. STREET ADDRESS 2.3 STREET ADDRESS **CLEARWATER FL 34625** CITY-ST-ZIF 24 CITY-ST ZIP DELETE TITLE 3 1 Ditte ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY - \$1 - ZiP DELETE TITLE 4 1 HOLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY-ST ZIF 4.4 CiTY-ST-ZIP DELETE Addition TITLE 5 1 THE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIF 5 4 CITY - ST - ZIP TITLE DELETE € 1 TITLE Change Addition 6.2 NAME

6.3 STREET ADORESS

6 4 CITY - \$1 - ZIF

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 for the receiver or trusted employeed 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 the analysis and address. SIGNATURE:

O OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR