

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

FILED
Feb 05, 1999 8:00 am
Secretary of State

02-05-1999 90013 036 ***150.00
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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P97000056235

1. Corporation Name
MACCLENNY AUTO BODY, INC.



Principal Place of Business
 180 S LONDER ST
 MACCLENNY FL 32063

Mailing Address
 180 S LONDER ST
 MACCLENNY FL 32063

3. Date incorporated or Qualified
06/25/1997

4. FEI Number
59-0452737

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

2a. Mailing Address
Macclenny Auto Body Inc

2b. Suits, Apt. #, etc.
180 South Londer St

2c. City & State
Macclenny FL

2d. Zip
32063

9. Name and Address of Current Registered Agent
JOHNS, JAMES E
RT-2 BOX 2730
GLEN ST MARY FL 32040

10. Name and Address of New Registered Agent

01 Name

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

03

04 City **FL** 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 _____ DATE _____
 (NOTE: Registered Agent signature required when replacing)

12. OFFICERS AND DIRECTORS

1.1 TITLE DELETE
D

1.2 NAME
JOHNS, WADE A

1.3 STREET ADDRESS
RT 1 BOX 807

1.4 CITY-ST-ZIP
MACCLENNY FL 32063

1.5 TITLE DELETE
Vice President

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

2.1 TITLE Change Addition
James Wade

2.2 NAME
James Wade

2.3 STREET ADDRESS
Rt 2 Box 2730

2.4 CITY-ST-ZIP
Glen St Mary FL 32040

2.5 TITLE Change Addition
President

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(c), 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: _____ DATE: **1/19/99** PHONE: **1-904-252-3001**

CR2E034 (1/1986)