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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 011233

LEE TIRE COMPANY OF FLORIDA

FILED
Feb 12 1997 8:00am
Secretary of State
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Principal Place 1529 N. BREVAF ARCADIA FL 33	RD AVENUE	Mailing Address 1529 N. BREVARD AVEN ARCADIA FL 34266-8759			·· 弗·西·· 南川田川 南北南川 南北南川 南山田川 (南南)
ARCADIA FL 33					
				•	•
A D				Date incorporated or Qualified 06/01/1922	3a. Date of Last Report 02/06/1996
·	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	4 -1-	26		59-0330060	Not Applicat
Suite, Apt.		Suite, Apt. #, etc.	***************************************	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	This corporation has liability for	
24	25	29	30		Yes No
	9, Name and Address of Curre			10. Name and Address of New R	
PEPP	PER, KENNETH A.		61 Name		
	N.ARCADIA AVE.		<u> </u>		
	ADIA FL 33821		82 Street Ac	ddress (P.O. Box Number is Not Accepta	ıble)
ANON	DIA 1 L GOOZ 1		83		
			, - 1	4	•
			84 City		85 Zip Code
del Discount	10 10 007 007	00 1007 1500 Et 11 0:			FL S Zip Code
office or re agent. I ar	egistered agent, or both, in the State m familiar with and accopt the oblig	of Florida, Such change was pations of, Section 607.0505,	ioles, the above-rained or is authorized by the corpo- Florida Statutes.	orporation submits this statement for the oration's board of directors. I hereby acce	purpose or changing its registered apt the appointment as registered
SIGNATURE			***************************************		
12.	Signature typed or printed name of registered ag-		IOTE: Registered Agent signature re-	· · · · · · · · · · · · · · · · · · ·	DATE DISCOVERS AND ASSESSMENT
	ST OFFICERS AN	ID DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	
	PEPPER, CAROLYN	L') nerese	1.1 TITLE		Change Addit
3	•		1.2 NAME		
STREET ADDRESS	1511 N.ARCADIA AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIF	ARCADIA FL	III nevere	1.4 CITY-ST-ZIP		
TITLE	P PER MENUTAL	☐ DELETE	2.1 TITLE		Change Additi
	PEPPER, KENNETH		2.2 NAME		
	1533 N. ARCADIA AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	ARCADIA FL		2. 4 CITY-ST-ZIP		
TITLE	VPD	DELETE	3.1 TITLE		Change Additi
NAME	PEPPER, ANN B.		3.2 NAME		
STREET ADDRESS	1533 N.ARCADIA AVE.		3.3 STREET ADDRESS		
CITY-ST-ZIP	ARCADIA FL	DECES:	3.4. CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
THILE		[] DELETE	4.1 TITLE		Change Additi
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
DrTY - ST - 7IP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Additi
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - S1 - ZIP			5 4 CITY+ST-ZIP		
TITLE "I	-	DELETE	61 TITLE		Change Additi
TITLE			1 I		
NAME			62 NAME		
[62 NAME 63 STREET ADDRESS		

I form the state of the mornial of supplied with this filling does not quality for the exemption stated in section 119.07(3)(i), Florida Statutes. Flurther 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 empower of to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an officers.

SIGNATURE: