

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 230142 (2)  
1. Corporation Name  
TIMES SQUARE CARWASH INC

Principal Place of Business  
2519 HENDRICK AVENUE  
JACKSONVILLE FL 32207

Mailing Address  
2519 HENDRICK AVENUE  
JACKSONVILLE FL 32207

FILED  
May 01 1998 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
11/05/1959

4. FEI Number  
59-0881539

Applied For  
Not Applicable

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 or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2056 Atlantic Blvd

Suite, Apt. #, etc.

City & State

23 Jacksonville, FL

Zip

24 32207

Country

25 Duval

2a. Mailing Address

26 2056 Atlantic Blvd.

Suite, Apt. #, etc.

City & State

28 Jacksonville, FL

Zip

29 32207

Country

30 Duval

9. Name and Address of Current Registered Agent

KINDT, EVAN  
2519 HENDRICKS AVENUE  
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81 Name R.J. Laurendeau  
82 Street Address (P.O. Box Number is Not Acceptable)  
2056 Atlantic Blvd.  
83  
84 City Jacksonville FL 85 Zip Code 32207

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 R.J. Laurendeau

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME RIDGWAY, JAMES E.  
STREET ADDRESS 4733 TIERRA ALTA COURT  
CITY-ST-ZIP LAKELAND FL ☒ DELETE

TITLE VP  
NAME KINDT, EVAN H.  
STREET ADDRESS 2519 HENDRICK AVENUE  
CITY-ST-ZIP JACKSONVILLE FL ☒ DELETE

TITLE TD  
NAME KINDT, EVAN H.  
STREET ADDRESS 2519 HENDRICK AVENUE  
CITY-ST-ZIP JACKSONVILLE FL ☒ DELETE

TITLE SD  
NAME BROOKS, O. BAKER JR.  
STREET ADDRESS 1914 BEACHWAY RD., STE. 3-C  
CITY-ST-ZIP JACKSONVILLE FL ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PST  
1.2 NAME R.J. Laurendeau  
1.3 STREET ADDRESS 2056 Atlantic Blvd.  
1.4 CITY-ST-ZIP Jacksonville, FL 32207 ☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE R.J. Laurendeau 4/23/99 300.5255

CR2E034 (10/97)