

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 05, 2004 08:00 AM
Secretary of State

DOCUMENT # 268664

1. Entity Name
DIMMITT CAR LEASING INC



Principal Place of Business
**C/O JOSHUA MAGIDSON, ESQ.
P.O. BOX 1669
CLEARWATER, FL 33757-1669 US**

Mailing Address
**C/O JOSHUA MAGIDSON, ESQ.
P.O. BOX 1669
CLEARWATER, FL 34617-1669 US**



02082004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1038909

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DIMMITT, LARRY, JR.
25191 U.S HWY 19 NORTH
CLEARWATER, FL 34623**

**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	VD
NAME	DIMMITT, LAWRENCE, III
STREET ADDRESS	1015 BAY ESPLANDE
CITY- ST- ZIP	CLEARWATER, FL
TITLE	VD
NAME	DIMMITT, RICHARD
STREET ADDRESS	965 BAY ESPLANADE
CITY- ST- ZIP	CLEARWATER, FL
TITLE	PD
NAME	DIMMITT, LARRY, JR.
STREET ADDRESS	150 WILLADEL DR
CITY- ST- ZIP	CLEARWATER, FL
TITLE	VTD
NAME	MAGIDSON, EILEEN DIMMITT
STREET ADDRESS	981 BAY ESPLANDE
CITY- ST- ZIP	CLEARWATER, FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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03/08/04-80002-015 150.00

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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 all other like empowered.

SIGNATURE:

Larry Dimmitt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/04

Date

727-791-3742

Daytime Phone #