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

FILED May 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 293172 (3) BELLM'S CARS OF YESTERDAY, INC. Principal Place of Business Mailing Address 5500 NORTH TAMIAMI TRAIL 5500 NORTH TAMIAMI TRAIL SARASOTA FL 34243 SARASOTA FL 34243 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified **05/24/1965** FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For ERNANDO AVE 59-1094537 Not Applicable Sulte, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name **BELLM.WALTER** 5500 N TAMIAMI TRAIL 82 Street Address (P.O. Box Number is Not Acceptable) **SARASOTA FL 34243** FERNANDO 83 64 City SARALOTA 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** Signature, typed or printed name of registored agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change TITLE **BELLM, WALTER** NAME 1.2 NAME HERNANDO AVE **5500 N TAMIAMI TRAIL** 1.3 STREET ADDRESS STREET ADDRESS **SARASOTA FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE PERCY, GEORGE NAME 2.2 NAME 329 SOMERSET AVE 2.3 STREET ADDRESS STREET ADDRESS **SARASOTA FL** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DILETE Change Change ☐ Addition TITLE DST 3.1 TITLE **BELLM, ELLEN** 3.2 NAME NAME 5500 N TAMIAMI TRAIL 3.3 STREET ADDRESS STREET ADDRESS **SARASOTA FL** 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE PERCY, MARILYN NAME 4. 2 NAME 329 SOMERSET AVE STREET ADDRESS 4.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 51 THLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS

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.

5.4 CITY - ST - ZIP

**6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

Change

Addition

DELETE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME