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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 472250

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DAVIS MOTORS OF MONTICELLO, INC.

A STATE OF THE STA						AN BUBIL BEBU BUBIL BU	(B)(B)(B)
Principal Place of Business Mailing Address							
890 NORTH JEFFERSON STREET 890 NORTH JEFFERSON STI							
MONTICELLO FL 32344-2130 MONTICELLO FL 32344-2130					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					03/20/1975		• [
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apr	olied For
					59-1622629		Applicable
26 Suite, Apt. #, etc. Suite, Apt. #, etc.					\$8.75 A		
22 27				Certificate of Status Desired			
City & State City & State				6. Election Campaign Financing	\$5.00		
23	28				Trust Fund Contribution	Added to	Fees
Zip	Country Zip		Country		8. This corporation owes the current year		_
24	25 29 30		30	Personal Property Tax. ☑ Yes □ No		∐No	
	9. Name and Address of Curren	t Registered Agent	81		10. Name and Address of New Register	ed Agent	
				Name	*1		ļ
DAVIS, JAMES LUTHER			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
FOUNTAIN DRIVE AT FLORIDA AVENUE			1	00000	3,000 (1,10), 50%, 112,1100, 10,1100, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000, 1000,		و بهو د
MONTICELLO FL 32344			83	-			
			84	City		85 Zip C	ode
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							
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-harned corporation studing this statement for fire purpose of changing is 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. 							
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Flori	iga Statutes	i.			
SIGNATURE		and the it englished (NOTE)	Decistand Age	t eignature reguu	red when reinstating) DATE		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re-			13.	. agrada roqu	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	Р	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	DAVIS.JAMES L.		1.2 NAME				
	FOUNTAIN DR. @ FLO. AVE.			TADDRESS		*	
STREET ADDRESS	_			i			
CITY-ST-ZIP	MONTICELLO FL	☐ DELETE	1.4 CITY-S 2.1 TITLE	I-ZIP		Change	Addition
TITLE	S	G bettere	1				
NAME	DAVIS,NELL H.		2.2 NAME				
STREET ADDRESS	1 Octobrate State Control		2.3 STREE	T ADDRESS		•	
CITY-ST-ZIP			2. 4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME	* A * * * * * * * * * * * * * * * * * *		3.2 NAME				
STREET ADORESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP) t		3.4. CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME	,•		4. 2 NAME		•		
STREET ADDRESS			4.3 STREE	TADORESS			
CITY-ST-ZIP	•		4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	· 🔲 Addition
NAME	-		5.2 NAME		,	• •	,
			5.3 STREE	TADDRESS			
STREET ADDRESS	ā ¹		5.4 CITY-S				
CITY-ST-ZIP							

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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ DELETE

SIGNATURE: JA

Feb 17, 1999 8:00 am Secretary of State

02-17-1999 90054 044 ***150.00

☐ Addition

Change