

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 19 AM 9:52

DOCUMENT # 483706

(8)

1. Corporation Name

D & W TIRE CO., INC.

Principal Place of Business

**2856 CLARK ROAD
SARASOTA FL 34231**

Mailing Address

**2856 CLARK ROAD
SARASOTA FL 34231**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/02/1975

3a. Date of Last Report
02/22/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-1613853

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24

Country

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**DONALD, ALEXANDER J
3835 SPYGLASS HILL RD
SARASOTA FL 33583**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 registered agent and title of agent after

(607.1508, Florida Statutes) Signature required after amendment

Date

12. OFFICERS AND DIRECTORS

TITLE

VD

NAME

DONALD, AMY W

STREET ADDRESS

**3835 SPYGLASS HILL RD
SARASOTA, FL 00000**

CITY, ST, ZIP

TITLE

PD

NAME

DONALD, ALEXANDER J

STREET ADDRESS

**3835 SPYGLASS HILL RD
SARASOTA, FL 00000**

CITY, ST, ZIP

TITLE

STD

NAME

WHITMORE, HELEN

STREET ADDRESS

**4712 OCEAN BLVD
SARASOTA, FL 00000**

CITY, ST, ZIP

TITLE

CD

NAME

WHITMORE, RAY J

STREET ADDRESS

**4712 OCEAN BLVD
SARASOTA, FL 00000**

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS, IF

14 TITLE

15 NAME

16 STREET ADDRESS

17 CITY, ST, ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in the laws of the State of Florida. 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 this corporation or the receiver or trustee empowered to execute this report as required by Chapter 192, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Amy Whitmore Donald

Amy Whitmore Donald

1/12/95

813

924-6504

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number