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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 483706

D & W TIRE CO., INC.

(8)

Principal Place of Business Mailing Address 2856 CLARK ROAD 2856 CLARK ROAD SARASOTA FL 34231-6220 SARASOTA FL 34231

FILED Jan 15 1997 8:00am Secretary of State



		•							
						 Date Incorporated or Qualified 09/02/1975 	3a. Date of Last 02/16/1996	Report	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For	
21 26						59-1613853		Not Applicable	
Suite, Apt	Suite, Apt. #, etc.	Apt #, etc.			5. Certificate of Status Desired	1 1	Additional Required		
27						 			
23 28						Election Campaign Financing Trust Fund Contribution		May Be d to Fees	
Zip	Country	Zip	Zip Cou			····			
24	25	29	30			8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes Yes \square No			
 1	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
DONALD, ALEXANDER J					Name				
3835 SPYGLASS HILL RD				82 Street Address (P.O. Box Number is Not Acceptable)					
SARASOTA FL 33583				Street Address (F.O. Box Nulliber is Not Acceptable)					
				83		**************************************			
				84	City		85 Zij	o Code	
		1007 1100 51 11 01							
office or a		of Florida. Such change was a	authorize	d by t		poration submits this statement for the p tion's board of directors. I hereby accep			
SIGNATURE. Signation, speed or printed runge of regionard day and title diappinson. (NOTE: Registered Agent signature required when reinstating). DATE DATE									
12.	OFFICERS AND DIRECTORS			I 13.		ADDITIONS/CHANGES TO OFFIC		PRS IN 12	
TITLE	VD DELETE			1.1 TITLE			Change		
NAME	DONALD, AMY W			1.2 NAME					
STREET ADDRESS	3835 SPYGLASS HILL RD			1 3 STREET ADDRESS					
CITY-ST-ZIP	SARASOTA, FL 00000			1.4 CITY-SI-ZIP					
DILE	PD DELETE		2 1 TI	2 1 TITLE		***************************************	☐ Change	Addition	
NAME	DONALD, ALEXANDER J		2 2 N	2 2 NAME				Ì	
STREET ADDRESS	3835 SPYGLASS HILL RD		2.3 STREET ADDRESS		DDRESS			}	
CITY-ST-ZIP	SARASOTA, FL 00000		2.4 CITY-ST-ZIP		- ZIP			j	
TITLE	STD DELETE		3.1 TI	3.1 TITLE			☐ Change	Addition	
NAME	WHITMORE, HELEN			3.2 NAME				ĺ	
STREET ADDRESS	4712 OCEAN BLVD		3.3 S1	TREET A	DORESS			1	
CITY - ST - ZIF	SARASOTA, FL 00000		3.4. C	3.4. CITY+ST-ZIP					
TITLE	CD DELETE		4.1 TI	4.1 TITLE			☐ Change	Addition	
NAME	WHITMORE, RAY J		. 4.2 N	. 4.2 NAME					
STREET ADDRESS	4712 OCEAN BLVD		4.3 ST	4.3 STREET ADDRESS					
CITY-ST-ZIP				4.4 CITY-ST-ZIP					
TITLE		L_ DELETE	ETE 5.1 TITL				Change	Addition	
NAME			5.2 N						
STREET ADDRESS			5.3 \$1	TREET A	DDRESS				
CITY-ST-ZIP				ITY-\$T-	ZIP				
THILE		DELETE	6.1 TI	TLE	1		Change	Addition	
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S ³	TREE1 A	DDRESS				
CITY-ST-ZIP	<u> </u>		6.4 CI	ITY - ST-	ZIP				

14. If do 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: Amy LAutine Doneld Amy WHITMORE DONALD SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0424469

Daytime Phone #