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

PROFIT CORPORATION ANNUAL REPORT



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

1996
DOCUMENT # 501466

(7)

Corporation Name

BARTLETT'S TIRE & SERVICE CENTER, INC.										
Principal Place of Business Mailing Address						1 18510 BINIV BOLDV 11010 BINIO 81110				
423 PRESTWI PALM BEACH	CK LANE I GARDENS FL 33418	423 PRESTWICK LANE PALM BEACH GARDEN								
						3. Date incorporated or Qualified 04/19/1976	3a. Date o	of Last F		
	ace of Business	2a. Mailing Address				4. FEI Number	<u></u>	TI	Applied For	
Suite, Apt. :	H oto	26				59-1657770			Not Applicable	
22 City & State		Suite, Apt. #, etc.				5. Certificate of Status Desired		•	5 Additional Required	
23		City & State			6. Election Campaign Financing		\$5.0	00 May Be		
Zip	Country	Zip	Countr			Trust Fund Contribution			d to Fees	
24			30			8. This corporation has liability for in Florida Statutes Yes		under s	199.032,	
	9. Name and Address of Current		_1301			10. Name and Address of New Ro	*****	ant .		
		n-min	81	Name		To. Hame did Address of Her II	State on Wi	Joint		
Bartlett, raymond J. Sr. 1930 S. Military Trail			82	Street	Address	(P.O. Box Number is Not Acceptable	e)	·····		
	ALM BEACH FL 33406		83							
			84	City						
11 Purpuent te	the provisions of Costiana COZ DE CO	1007 1500 5		1 '			FL		ip 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 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 arranged with, and accept the obligations of, Section 607.0505, Florida Statutes.									registered office agent. I am	
SIGNATURE	The property of the penigations of people	1 607.0005, Florida Statutes	•						_	
	Signature, typed or printed han ic of registered agent an		ITE Registered Age	nt signature r	required wh	en reinstating)	DATE			
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE		IRECTO	ORS IN 12	
TITLE	PD	DELETE	1. 1 THEE					Change	Addition	
NAME	BARTLETT, RAYMOND J. SR		1.2 NAME							
STREET ADDRESS			1.3 STREE	ADDRESS						
CITY - ST - ZIP	PALM BCH. GRDNS. FL		14 CITY-5	ST - ZIP	ļ <u></u>					
TITLE	ST CAROLINA	DELETE	2 1 THE					Change	Addition	
NAME			2 2 NAME	2 2 NAME						
STREET ADDRESS	423 PRESTWICK LANE		2.3 STREET	ADDRESS					ĺ	
CITY-ST-ZIP			2.4 CiTy - 9	I - ZIP						
TITLE		DELETE	3. 1 TITLE	İ				Change	Addition	
NAME			3.2 NAME							
STREET ADDRESS			33 SIREE	T ADDRESS						
CITY-ST-ZIP TITLE		TI DELETE	3.4 CITY-S	T-ZIP						
NAME		☐ DELETE	4. 1 TITLE					Change	Addition	
			4.2 NAME							
STREET ADDRESS			4.3 STREET	ADDRESS					j	
CITY-ST-ZIP TITLE			4.4 CITY - S	1-ZIP						
NAME		DECETÉ	5. 1 TITLE					Change	Addition	
STREET ADDRESS			5.2 NAME							
CITY-ST-ZIP			5 3 STREET							
TITLE		DELETE	5.4 CITY-S	1-7 ₁ P						
NAMÉ		[] occess	6 1 TITLE					Change	Addition	
STREET ADDRESS			6.2 NAME	4D0D500					1	
CITY-ST-ZIP			6.3 \$18661							
	certify that the information supplied with	h this filing is voluntarily furni	6.4 CITY-S shed and door	1-ZIP	lifu for th	a avagration stated in Coation 140.0	700/04 - 51	0		

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:

5/20/9-C

407-964-3894