## 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 #
1. Corporation Name

537138

(0)

B & C TIRE AND BATTERY, INC.

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Principal Place of Business Maling Address						(110)		
1260 SO 8T FERNANDINA	'H STREET A BCH FL 32034	1260 SO 8 Fernandin	TH STREET A BCH FL 32034					
					3. Date Incorporated or Qualifie 06/14/1977	d <b>3a</b> . Dat	e of Last Report <b>08/25/1995</b>	
2. Principal Plac	e of Business	2a. Mailing Addi	ess		4. FEI Number		Applied For	
21		26			59-1759689		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State	City & State		Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip Country		Zip	Zip Country		8. This corporation has liability for intangible tax under s 199.032,			
24	25	29	30		Florida Statutes	res 🔲 No		
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of Nev	v Registered	l Agent	
				81 Name				
COCHE	ran, mark dennis		ļ	82 Street Adg	ress (P.O. Box Number is Not Accep	table)	Dance	
120 M/	arian dr				od I raju	un	WCIVE	
FERNA	INDINA BEACH FL 32034			83				
			-	84 City		FI	85 Zip Code	
-					and the state of t			
or registere	the provisions of Sections 607.0502 d agent, or both, in the State of Floric , and accept the obligations of, Secti	ila. Such change was	s authorized by the c	orporation's boa	and of directors. Thereby accept the a	ippointment a	is registered agent. I am	
SIGNATURE		and a state of a supplement	#OIE Positived	Agent signature requir	ad when reinstation	DATE		
12.	Signature, typico or printed name of rigistered agent OFFICERS ANI		13.	igniting transfer	ADDITIONS/CHANGES TO	OFFICERS AN	ID DIRECTORS IN 12	
TITLE	PS	DE	1.67£ 1.17(	TLE			Change Addition	
NAME	COCHRAN, MARK D.		1.2 NA	ME				
STREET ADDRESS	1332 MARIAN DRIVE		1,3 ST	REET ADDRESS				
CITY-ST-ZIP	FERNANDINA BEACH FL			TY-ST-ZIP				
TITLE	P	☐ DE	LETE 2 1 TI		,		Change Addition	
NAME	COCHRAN, MARK D		22 N.	ME	1332 maria	$\mathcal{O}_{\infty}$	RIVE	
STREET ADDRESS	120 MARIAN DRIVE		2.3 \$1	REET ADDRESS	( = - <del></del> -	,	•	
CITY-S1-ZIP	FERNANDINA BCH FL			TY-ST-ZIP			<b>57</b> 05	
TITLE	V	□ D£			1326 Mal	i a	Change Addition	
NAME	STEWART, STANLEY W.		3.2 N/		1276 11 MK	ian	DRIVE	
STREET ADDRESS	118A MARIAN DR		3 3. S	TREET ADDRESS				
CITY-ST-ZIP	FERNANDINA BCH FL			TY-ST-ZIP			Change Addition	
TITLE	T	□ DE					T cuande T wordon	
NAME	LION, MICHAEL		4.2 N				•	
STREET ADDRESS	3165 FIRST AVENUE			IREET ADDRESS				
CITY-ST-ZIP	FERNANDINA BEACH FL			TY-ST-ZIP			Change Addition	
TITLE			5.11 52 N	1				
NAME AXREST ADDRESSA			i i					
STREET ADDRESS				THEFT ADDRESS				
C(TY-ST-Z)P		DI DI		NY-ST-ZIP			Change Addition	
TITLE		( /·	6.2 N				·	
NAME expect annuese				TREET ADDRESS				
STREET ADDRESS				ITY-ST-ZIP				
CITY-ST-ZIP	I		■ 04U	111-01-41 {				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indigated or this angual report on 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 corpolation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if charged, or on an attactment with an address.

SIGNATURE:

URE AND TYPED OR RANTED NAME OF SIGNING OFFICER OR DIRECTOR

904,261-3684