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 590975

(9)

MORGAN'S CAR SALES, INC.

FILED May 01 1996 8:00 am Secretary of State



Principal Place of Business Mailing Address 2766 US HWY 441-27 2766 US HWY 441-27 FRUITLAND PARK FL 34731 FRUITLAND PARK FL 34 US				731 3. Date Incorporated or Qualified 3a. Date of Last Report		
					10/24/1978	03/08/1995
	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 Code A-4		26			59-1864018	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	- 1		5. Certificate of Status Desired	\$8.75 Additional
City & State		Ct. 8 Ct. 4	City & State			Fee Required
23	~	28			6. Election Campaign Financing	\$5.00 May Be
Zip	Country	7 _{ID}	Count	····	Trust Fund Contribution	Added to Fees
24	<u>├</u> ─┐ '		30	· y	This corporation has liability for intangible tax under s=199,032, Florida Statutes	
	9. Name and Address of Current			· ,	10. Name and Address of New R	
			8	1 Name		-p
MORGAN, JOE L.				82 Street Address (P.O. Box Number is Not Acceptable)		
	Magnolia Ridge RD		oz Street Addre		ress (C.O. DOX NUHIDER IS NOT Acceptab	ej
FRUITLA	AND PARK FL 34731		В	3		
				4 City		
			!	1 ' '	ration submits this statement for the purp	FL. 85 Zip Code
12.	Signature, hipe I or pricted name of registered a just a OFFICERS AND	DIRECTORS	1071 - Sa policio i Agi	i i signati ne ne jino	ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1 1 Trīle	- T		☐ Change ☐ Addition
NAME	MORGAN, JOE L.		1.2 NAME			, ===
STREET ADDRESS	05351 MAGNOLIA RIDGE RD		13 STREE	I ADDRESS		
CITY-S1-ZIP	FRUITLAND PARK FL		1.4 C+TY	\$1 - 7IP		
TITLE	STD NODCAN LUCKIEW	☐ DELETE	2 1 1/11			Change Addition
NAME OTHER LEGISCO	MORGAN, LUCILLE V.		2.2 NAME			
STREET ADDRESS	05351 MAGNOLIA RIDGE RD			:T ADDRESS		
CITY-ST-ZIP TITLE	FRUITLAND PARK FL VD	T printe	2.4 CiTY			
NAME	MORGAN, RANDALL L.	DECETE	3 1 TITLE			Change Addition
STREET ADDRESS	37245 GRAYS AIRPORT RD		3.2 NAME			
CHY+ST-ZIP	LADY LAKE FL			ET ADDRESS		
THE	·	DELETE	3.4 CiTY -			
NAME		Посель	4 1 THEE			Change 🗀 Addition
STREET ADDRESS						
CITY - ST - ZIF			4.3 STREE	LASORESS St. 70		
TITLE		☐ DELETE	5 1 Trile	31 · ZI*		☐ Change ☐ Addition
NAME			5.2 NAME			☐ ocea ão ☐ vonitos
STREET ADDRESS				I ADDRESS		
CITY-ST-ZIF			5.4 CITY -			
TITLE		☐ DELETE	6 1 TIFLE			Change Addition
NAME			6.2 NAM€			
STRFET ADDRESS			63 STREE	T ADDRESS		
CHTY-ST-ZIP			6.4 CITY -	S*-7IP		

14. I do hereby certify that the information supplied with this firing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(x). 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 appears in Block 12 or Block 13 if changed, or or an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lucille V. Morgan 3-20-96