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

**PROFIT** CORPORATION **ANNUAL REPORT** 1998 DOCUMENT # Principal Place of Business 301 NORTH BAY STREET EUSTIS FL 32726 2. Principal Place of Business 21 Suite, Apt #, etc 22 City & State 23 Zip

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

595947 H & D AUTO PARTS COMPANY OF EUSTIS, INC.

FILED Jun 04 1998 8:00am Secretary of State



Mailing Address 301 NORTH BAY STREET EUSTIS FL 32726 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>11/07/1978</u> Applied For 2a. Mailing Address Not Applicable 59-1865901 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. □ No 24 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 DAVIS, RANTSON E. 1321 WEST CITIZENS BLVD., SUITE F 82 Street Address (P.O. Box Number is Not Acceptable) LEESBURG FL 32748 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NO11 Registered Agent signature required when reinstating) Signature, typical or printed name of registered agost and title if applicabili-12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1 1 1ITCE DILLARD, SHARMAN DALE 12 NAME NAME **301 NORTH BAY STREET** STREET ADDRESS 1.3 STREET ADDRESS **EUSTIS FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DILLETE Change Addition TITLE 2.1 TITLE STADDARD, KENNETH NAME 2.2 NAME 1001 OVERLOOK WAY STREET ADDRESS 2.3 STREET ADDRESS TAVARES FL CITY-ST-ZIP 2. 4 C(TY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE DILLARD, RANDALL S. 3.2 NAME NAME **301 NORTH BAY STREET** STREET ADDRESS 3.3 STREET ADDRESS **EUSTIS FL** 3 4. CITY - ST - ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition Change TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY+ST-ZIP

14. Thereby 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 supplieriental 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 appropriate by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an altachment with an address.