SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 20 AM 8:29

DOCUMENT # **627203** **(3)**

1. Corporation Name
NAPLES AUTO ELECTRIC, INC.

Principal Place of Business	Mailing Address
3126 DAVIS BLVD. NAPLES FL 33942-4343	3126 DAVIS BLVD. NAPLES FL 33942-4343

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/22/1979	3a. Date of Last Report: 07/26/1994
4. FEI Number: 59-1920183	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

9. Name and Address of Current Registered Agent

DICKERSON, JASON C.
1899 MISSION DRIVE
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name: Jason C. Dickerson
82 Street Address (P.O. Box Number is Not Acceptable): 3126 Davis Blvd.
83
84 City: Naples FL 85 Zip Code: 33942

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Jason C. Dickerson — 6/14/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	11 TITLE	☐ Change ☐ Addition
NAME	STOCK, DONALD	12 NAME	
STREET ADDRESS	1446 CURLEW AVENUE	13 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	14 CITY-ST-ZIP	
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	SKINNER, NATHANIEL P.	22 NAME	
STREET ADDRESS	1989 45TH TERRACE S.W.	23 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	24 CITY-ST-ZIP	
TITLE	PTD	31 TITLE	☒ Change ☐ Addition
NAME	DICKERSON, JASON	32 NAME	PTD
STREET ADDRESS	1899 MISSION DRIVE	33 STREET ADDRESS	Dickerson, Jason
CITY-ST-ZIP	NAPES FL	34 CITY-ST-ZIP	3126 Davis Blvd. Naples, FL. 33942
TITLE	VSD	41 TITLE	☒ Change ☐ Addition
NAME	DICKERSON, KIMBERLY	42 NAME	VSD
STREET ADDRESS	1899 MISSION DRIVE	43 STREET ADDRESS	Dickerson, Kimberly
CITY ST ZIP	NAPLES FL	44 CITY-ST-ZIP	3126 Davis Blvd. Naples, FL. 33942
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY-ST-ZIP	

CR2E034 (3/95)

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)(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: Jason C. Dickerson (Pres) — 6/14/95 — 941 775 5599
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

010C036 CP