

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 24, 1999 8:00 am
Secretary of State

03-24-1999 90047 001 ***150.00

DOCUMENT # 672058

1. Corporation Name
LAKELAND TRUCK PARTS, INC.

Principal Place of Business

C/O BRIGGS, HAROLD G.
5951 LAKE VICTORIA DRIVE
LAKELAND FL 33813
US

Mailing Address

C/O BRIGGS, HAROLD G.
5951 LAKE VICTORIA DRIVE
LAKELAND FL 33813
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/01/1980

4. FEI Number

59-1997380

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 owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 5951 Lake Victoria Dr.
Suite, Apt. #, etc.

2a. Mailing Address

26 5951 Lake Victoria Dr.
Suite, Apt. #, etc.

22 Lakeland, FL
City & State

27 Lakeland, FL
City & State

23 Zip Country
24 33813 25 Polk

28 Zip Country
29 33813 30 Polk

9. Name and Address of Current Registered Agent

BRIGGS, HAROLD G
5951 LAKE VICTORIA DRIVE
LAKELAND FL 33813

81 Name

BIGGS, Harold G.

82 Street Address (P.O. Box Number is Not Acceptable)

5951 Lake Victoria Drive

83

Lakeland, FL 33813

84 City

FL

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

SIGNATURE

Harold G. Briggs

(NOTE: Registered Agent signature required when reinstating)

DATE

3-10-99

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BIGGS, HAROLD G.
STREET ADDRESS 5951 LAKE VICTORIA DR
CITY-ST-ZIP LAKELAND, FL 00000

☐ DELETE

TITLE DST
NAME BIGGS, GLINNIS
STREET ADDRESS 5951 LAKE VICTORIA DR
CITY-ST-ZIP LAKELAND, FL 00000

☐ DELETE

TITLE M
NAME BIGGS, CYNTHIA LYNN
STREET ADDRESS 1371 BRAMBLEWOOD DR
CITY-ST-ZIP LAKELAND FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby 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 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, with all other like empowered.

SIGNATURE:

Harold G. Briggs

3-10-99

941-6880282

CR2E034 (11/98)