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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 678512

BROOKSVILLE AUTO PARTS, INC.

Principal Place of Business	Mailing Address	
315 W JEFFERSON ST	315 W JEFFERSON ST	
BROOKSVILLE FL 34601	BROOKSVILLE FL 34601	

FILED Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90016 025 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/15/1980 4. FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business 59-2062978 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Zip Country Zip Country 8. This corporation owes the current year Intangible □No 30 Personal Property Tax. 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name HOWLAND, HELEN M. Street Address (P.O. Box Number is Not Acceptable) 82 8028 GROVE RD. BROOKSVILLE, FL 83 34601 Zip Code 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature require n reinstating) 👯 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. 20, 20, 00, 520 □ DELETE PCD 1.1 TITLE TITLE HOWLAND, STEVE 1.2 NAME NAME 8028 GROVE RD. 1.3 STREET ADDRESS STREET ADDRESS **BROOKSVILLE, FL 00000** 1,4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE ST 2.1 TITLE TITLE HOWLAND, HELEN M. 22 NAME NAME 8028 GROVE RD. 2.3 STREET ADDRESS STREET ADDRESS **BROOKSVILLE, FL 00000** 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Addition 3.1 TITLE TITLE HOWLAND, STEPHANIE 3.2 NAME NAME 8028 GROVE ROAD 3.3 STREET ADDRESS STREET ADDRESS **BROOKSVILLE FL** 3.4. CITY-ST-ZIP CITY-ST-ZIF DELETE · Change 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS

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.

64 CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIF

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