

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Jul 23, 1999 8:00 am
Secretary of State

07-23-1999 90010 023 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # 714030

1. Corporation Name

FLORIDA INDEPENDENT TIRE DEALERS AND RETREADERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2255 GLADES RD
 STE 324-A
 BOCA RATON FL 33431
 US

2255 GLADES RD
 STE 324-A
 BOCA RATON FL 33431
 US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

01/30/1968

22 City & State

27 City & State

4. FEI Number
 59-1166175

Applied For
 Not Applicable

23 Zip Country

28 Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

24 Zip Country

29 Zip Country

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MONDO, JILL
 2255 GLADES RD
 STE 324-A
 BOCA RATON FL 33431

*add to address:
 ← PMB 1000*

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Jill Mondo

7/19/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VPD
 NAME MOORE, TERRY
 STREET ADDRESS 1119 W KENNEDY BLVD
 CITY-ST-ZIP TAMPA FL 33606 DELETE

1.1 TITLE Joe Kovac
 1.2 NAME Kovac Automotive
 1.3 STREET ADDRESS 2770 Davie Rd
 1.4 CITY-ST-ZIP Davie, FL 33314 Change Addition President Elect D

TITLE STD
 NAME MARCOE, SHERRY
 STREET ADDRESS 1200 S BERMUDA AVE
 CITY-ST-ZIP KISSIMMEE FL 34741 DELETE

2.1 TITLE John Tidwell
 2.2 NAME Mike Gatto Inc
 2.3 STREET ADDRESS 15 W. Hibiscus Avenue
 2.4 CITY-ST-ZIP Melbourne, FL 32902 Change Addition VPD

TITLE PD
 NAME FRANKLIN, MICKY
 STREET ADDRESS 300 PONDELLA ROAD
 CITY-ST-ZIP NORTH FORT MYERS FL DELETE

3.1 TITLE
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP Change Addition

TITLE VPD
 NAME PEREDA, DAN
 STREET ADDRESS 1609 N COCOA BLVD
 CITY-ST-ZIP COCOA FL 32922 DELETE

4.1 TITLE President
 4.2 NAME
 4.3 STREET ADDRESS 3850 NW 30th Ave.
 4.4 CITY-ST-ZIP Miami, FL 33212 Change Addition

TITLE ED
 NAME MONDO, JILL
 STREET ADDRESS 2255 GLADES RD #324-A
 CITY-ST-ZIP BOCA RATON FL 33431 DELETE

5.1 TITLE
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP DELETE

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 617, 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:

SIGNATURE REQUIRED

7/17/99

954-788-6960

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/99)