

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
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90138 038 ***150.00

DOCUMENT # F98000005847

1. Corporation Name

DANNY'S TOWING & AUTOMOTIVE SERVICE, INC.

Principal Place of Business

1007 PALMVIEW DR
DAYTONA BEACH FL 32119

Mailing Address

1007 PALMVIEW DR
DAYTONA BEACH FL 32119

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/20/1998

4. FEI Number

59-3467128

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

2. Principal Place of Business

21 1510 N. HWY US 1

2a. Mailing Address

26 1510 N. HWY US 1

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Ormond Bch, Florida

City & State

28 Ormond Bch, Florida

Zip

24 32174

Country

25 Volusia

Zip

29 32174

Country

30 Volusia

9. Name and Address of Current Registered Agent

GAYNE, DANNY
1007 PALMVIEW DR
DAYTONA BEACH FL 32119

10. Name and Address of New Registered Agent

81 Name

GAYNE, DANNY

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

517 SANDY OAKS BLVD

83

84 City

Ormond Bch

FL

85 Zip Code

32174

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

DANNY GAYNE - President

2-12-99

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME GAYNE, DANNY
STREET ADDRESS 1007 PALMVIEW DR
CITY-ST-ZIP DAYTONA BEACH FL 32119

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition

1.2 NAME GAYNE, DANNY
1.3 STREET ADDRESS 517 SANDY OAKS BLVD.
1.4 CITY-ST-ZIP Ormond Bch, FL 32174

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-99

Date

Daytime Phone #

(904)257-3020

CR2E034 (11/98)