

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR -3 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G73662

(0)

1. Corporation Name

MACCLENNY MOTOR PARTS, INC.

Principal Place of Business

% ALAN TANNER
264 W. MACCLENNY AVENUE
MACCLENNY FL 32063

Mailing Address

% ALAN TANNER
264 W. MACCLENNY AVENUE
MACCLENNY FL 32063

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/01/1984

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2031549

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TANNER, ALAN
264 W. MACCLENNY AVENUE
MACCLENNY FL 32063

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 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

(Type or print name of person signing and the designation)

(NOTE: Registered Agent signature required when making change)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

ST

TANNER, GINA
264 W. MACCLENNY AVENUE
MACCLENNY FL

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

PD

TANNER, ALAN
264 W. MACCLENNY AVENUE
MACCLENNY FL

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and claims not qualify for the exemption stated in Section 110 (07/04/94), Florida Statutes. I further certify that the information is true and correct to the best of my knowledge and belief and that my signature shall have the same legal effect as if made under oath. This filing is an official record of the corporation and the undersigned is empowered to execute this report as required by Chapter 417, Florida Statutes, and that my name appears in Block 12 or Block 13. I am attaching this statement with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALAN TANNER

2-21-95 (904) 259-2851