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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G95212

(8)

BELL'S AUTOMOTIVE, INC.

FILED

Apr 15 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address 3536 MORROW STREET 3536 MORROW STREET JACKSONVILLE FL 32217 JACKSONVILLE FL 32217 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/02/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2395692 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. ☐ Yes ☐ No 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BELL, STEPHEN W. 3536 MORROW ST. **B2** Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32217 83 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE **BELL**, STEPHEN W. NAME 1.2 NAME **3536 MORROW STREET** STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 32217 1.4 CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE Bell, Thomas D. 3536 Morrow St Falksonville, FL 32217 **BELL. THOMAS P.** NAME 2.2 NAME 3536 MORROW ST. 2.3 STREET ADDRESS STREET ADDRESS Jacksonville FL 32217 2. 4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE TIT1 F 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 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

6.4 CITY-ST-ZIP

11.9,00