

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  
Apr 20, 1999 8:00 am  
Secretary of State

04-20-1999 90284 006 \*\*\*150.00

DOCUMENT # H63655

1. Corporation Name  
COUNTRYSIDE CARS, INC.

Principal Place of Business

23499 US 19 N  
CLEARWATER FL 33765  
US

Mailing Address

23499 US 19 N  
CLEARWATER FL 33765  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/25/1985

4. FEI Number

59-2544532

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 2627 HARBOR CIRCLE

Suite, Apt. #, etc.

22

City & State

23 CLEARWATER, FL

Zip Country

24 33759 25 US

2a. Mailing Address

26 -2964 DEER RUN SOUTH

Suite, Apt. #, etc.

27

City & State

28 CLEARWATER, FL

Zip Country

29 33761 30 US

9. Name and Address of Current Registered Agent

BAKER, GEORGE D.  
23499 US 19 N  
CLEARWATER FL 34625-8576

10. Name and Address of New Registered Agent

81 Name

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

2964 DEER RUN SOUTH

83

84 City

CLEARWATER,

FL

85 Zip Code

33761

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
DP  
BAKER, GEORGE D.  
STREET ADDRESS  
23499 US 19 N  
CITY-ST-ZIP  
CLEARWATER FL

TITLE ☐ DELETE

NAME  
DS  
BAKER, DENISE  
STREET ADDRESS  
23499 US 19 N  
CITY-ST-ZIP  
CLEARWATER FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
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 ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2627 HARBOR CIRCLE  
CLEARWATER, FL 33759

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

2627 HARBOR CIRCLE  
CLEARWATER, FL 33759

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 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:

*Denise Baker*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-12-99

Daytime Phone #

727-791-9991

CR2E034 (1/98)