

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL 24 AM 11:06

DOCUMENT # J04278

(4)

1. Corporation Name

FAST OIL & LUBE CENTERS OF FLORIDA, INC.

Principal Place of Business

Mailing Address

% EDWARD WITHERSPOON
3315 SW 7TH LANE
CAPE CORAL FL 33991

% EDWARD WITHERSPOON
3315 SW 7TH LANE
CAPE CORAL FL 33991

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/17/1986

3a. Date of Last Report

03/08/1994

4. FEI Number

59-2681151

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

7. This corporation has liability for intangible tax under s. 199.022,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WITHERSPOON, EDWARD
3315 SW 7TH LANE
CAPE CORAL FL 33991

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

(Signature, typed or printed name of registered agent and title of corporation)

(NOTE: Registered Agent signature required when reappointing)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

PD
WITHERSPOON, EDWARD
1333 SE 40TH TERR, S-2A
CAPE CORAL FL

1.1 TITLE

☐ Change ☐ Addition

2. NAME

1.2 NAME

3. STREET ADDRESS

1.3 STREET ADDRESS

4. CITY, ST, ZIP

1.4 CITY, ST, ZIP

☐ Change ☐ Addition

5. TITLE

D
WITHERSPOON, MARY
1333 SE 40TH TERR, S-2A
CAPE CORAL FL

2.1 TITLE

☐ Change ☐ Addition

6. NAME

2.2 NAME

7. STREET ADDRESS

2.3 STREET ADDRESS

8. CITY, ST, ZIP

2.4 CITY, ST, ZIP

☐ Change ☐ Addition

9. TITLE

3.1 TITLE

10. NAME

3.2 NAME

11. STREET ADDRESS

3.3 STREET ADDRESS

12. CITY, ST, ZIP

3.4 CITY, ST, ZIP

☐ Change ☐ Addition

13. TITLE

4.1 TITLE

14. NAME

4.2 NAME

15. STREET ADDRESS

4.3 STREET ADDRESS

16. CITY, ST, ZIP

4.4 CITY, ST, ZIP

☐ Change ☐ Addition

17. TITLE

5.1 TITLE

18. NAME

5.2 NAME

19. STREET ADDRESS

5.3 STREET ADDRESS

20. CITY, ST, ZIP

5.4 CITY, ST, ZIP

☐ Change ☐ Addition

21. TITLE

6.1 TITLE

22. NAME

6.2 NAME

23. STREET ADDRESS

6.3 STREET ADDRESS

24. CITY, ST, ZIP

6.4 CITY, ST, ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 addendum.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDWARD P. WITHERSPOON

7/10/95

Pres.