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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J04665

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90200 048 ***150.00

BEE'S A	UTO, INC.					•				
Principal Place	e of Business	Mailing	Address					ido dem didir did	ii didii tibi i	: 1991 11813 11814
% WAYNE E. WEATHERBEE % WAYNE E. WEATHERBEE 899 MONTROSE ST 899 MONTROSE ST CLERMONT FL 34711-2123 CLERMONT FL 34711-2123						DO NOT WRIT	re in this s	SPACE		
OLEHMUNI FL	34111-2123	CLEMMC	mi FL 34(11-2123	,			3. Date Incorporated or Qualifed			
l							03/17/1986			
2. Principal P	ace of Business	2a. Mai	ling Address				4. FEI Number		A	opplied For
21		26					59-2645487			lot Applicable
Suite, Apt.	#, etc.	Suit	te, Apt. #, etc.				5. Certifcate of Status Desired			Additional Required
City & State	9	City	& State				6. Election Campaign Financing			May Be
23		28					Trust Fund Contribution			to Fees
Zip	Country	Zip		Cou	ntry		8. This corporation owes the curre		ngible □ Yes	□No
24	25 25 Current Address of Current	29	t Agent	30			Personal Property Tax. 10. Name and Address of New R			
_	9. Name and Address of Curre	nt Kegistered	Agent		81	Name	TV. Hallie and Address of New h	Calacalen W	B-111	
	THERBEE, WAYNE E.			·	82		ss (P.O. Box Number is Not Accepta	ible)		
899 MONTROSE ST CLERMONT FL 32711					83					
			_		84	City		FL	85 Zip	Code
office or n agent. I a SIGNATURE	egistered agent, or noth, in the State m familiar with, and accept the obligation of the control			ン		signature required	ration submits this statement for the n's board of directors. I hereby acception when reinstating)	DATE DATE		
12.	OFFICERS AF	ND DIRECTO	RS	13.			ADDITIONS/CHANGES TO OF	FICERS AND		
TITLE	PD		☐ DELETE	1,1 TD	πE				Change	Addition
NAME	Weatherbee, Wayne E.									
STREET ADDRESS	RT 2, BOX 339			1.2 NA	ME				·	
CITY-ST-ZIP				1		ADDRESS				
TITLE	GROVELAND FL			1,3 ST 1,4 CI	REET A				Change	C Addition
	GROVELAND FL		☐ DELETE	1,3 ST 1,4 Cr 2,1 TII	reet / ty-st- tle				☐ Change	Addition
NAME	GROVELAND FL		☐ DELETE	1.3 ST 1.4 Cr 2.1 TH 2.2 NA	TREET A TY-ST- TLE WE	- <u>ZIP</u>			☐ Change	☐ Addition
STREET ADDRESS	GROVELAND FL		☐ DELETE	1.3 ST 1.4 Cr 2.1 TII 2.2 NA 2.3 ST	TY-ST- TLE WE TREET	- ZIP ADDRESS			☐ Change	Addition
STREET ADDRESS	GROVELAND FL			1.3 ST 1.4 Cr 2.1 TII 22 N# 2.3 ST 2.4 Cr	TY-ST- TLE AME TREET!	- ZIP ADDRESS			☐ Change	
STREET ADDRESS C/TY-ST-Z/P TITLE	GROVELAND FL		DELETE	1.3 ST 1.4 Cr 2.1 TH 22 NA 2.3 ST 2.4 Cr 3.1 TH	TREET A TY-ST- TLE WANE TREET A TTY-ST TLE	- ZIP ADDRESS				
STREET ADDRESS CITY-ST-ZIP TITLE NAME	GROVELAND FL			1.3 ST 1.4 Cr 2.1 TH 2.2 N# 2.3 ST 2.4 Cr 3.1 TH 3.2 N#	TREET / TLE AME TREET / TLE TLE AME	- ZIP ADDRESS T- ZIP				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	GROVELAND FL			1.3 ST 1.4 Cr 2.1 Tr 2.2 NA 2.3 ST 2.4 Cr 3.1 Tr 3.2 NA 3.3 ST	TREET / TLE TAME TREET / TTY- ST TLE TREET / TTY- ST TLE TREET /	ADDRESS				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	GROVELAND FL			1.3 ST 1.4 Cr 2.1 Tr 2.2 NA 2.3 ST 2.4 Cr 3.1 Tr 3.2 NA 3.3 ST	TREET / TY-ST- TLE TREET / TTY-ST TLE TREET / TTY-ST TLE TREET / TY-ST	ADDRESS				Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	GROVELAND FL		☐ DELETE	1.3 ST 1.4 Cr 2.1 TT 22 Ns 2.3 ST 2.4 C 3.1 TT 3.2 Ns 3.3 ST 3.4 Cr	TY-ST- TLE AME TY-ST TLE AME TREET / TLE AME TREET / TLE TREET / TLE TREET /	ADDRESS			☐ Change	Addition
STREET ADDRESS C/TY-ST-ZIP TITLE NAME STREET ADDRESS C/TY-ST-ZIP TITLE	GROVELAND FL	,	☐ DELETE	1.3 ST 1.4 CC 2.1 TTI 22 NA 2.3 ST 2.4 CC 3.1 TTI 3.2 NA 3.3 ST 3.4 CC 4.1 TTI 4.2 NA	TREET / TY-ST- TLE TREET / TTY-ST TLE TREET / TTY-ST TLE TREET / TTY-ST TLE TREET / TTY-ST TLE	ADDRESS			☐ Change	Addition
STREET ADDRESS C/TY-ST-ZIP TITLE NAME STREET ADDRESS C/TY-ST-ZIP TITLE NAME	GROVELAND FL		☐ DELETE	1.3 ST 1.4 CC 2.1 TII 22 NS 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4 CC 4.1 TII 4.2 NA 4.3 ST	TREET / TY-ST- TLE TREET / TTY-ST TLE TREET / TTY-ST TLE TREET / TTY-ST TLE TREET / TTY-ST TLE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS			☐ Change	Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME	GROVELAND FL	,	☐ DELETE	1,3 ST 14 CT 2.1 TT 22 No. 2.3 ST 2.4 CT 3.1 TT 3.2 No. 3.3 ST 3.4 CT 4.1 TT 4.2 No. 4.3 ST 4.4 CT 5.1 TT 5.2 No. 5.3 ST 5.4 CT 5.3 ST 5.4 CT 5.4 CT 5.5 ST 5.4 CT 5.5 TT 5.5 CT 5.5 ST 5.4 CT 5.5 TT 5.5 TT 5.5 CT 5.5 CT 5.5 TT 5.5 CT 5.5 CT 5.5 TT 5.5 CT 5.5 CT 5.5 CT 5.5 TT 5.5 CT	TY-ST- TLE AME REET / TTY-ST TLE AME TREET / TLE AME TY-ST TLE AME TY-ST- TLE TY-ST- TY-ST- TY-ST- TY-ST- TY-ST- TY-ST- TY-ST- TY-ST- TY-ST-	ADDRESS ADDRESS T-ZIP ADDRESS LZIP ADDRESS			☐ Change	Addition Addition Addition
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14. I hereby certify that the information supplied with this filing does not qualify or the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or supplemental annual report is muy and according and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the composition of the receiver does not 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 another my signature shall be empowered.

SIGNATURE

SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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