

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # J12860

(9)

1. Corporate Name

PINE HILLS AUTO CENTER, INC.

APPROVED
AND
FILED

95 MAY - 1 11 3:57

5501 MAZDA DRIVE
TALLAHASSEE, FLORIDA

Principal Place of Business

**% JONATHAN ALAN BREWSTER
4855 WEST COLONIAL DRIVE
ORLANDO FL 32808**

Mailing Address

**% JONATHAN ALAN BREWSTER
4855 WEST COLONIAL DRIVE
ORLANDO FL 32808**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 State Apt # etc

22 City & State

24 Zip

25 Country

2a Mailing Address

26 State Apt # etc

27 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

05/06/1986

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2667783

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. The corporation has liability for intangible tax under S. 190.01, F.S.
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**BREWSTER, JONATHAN ALAN
4855 WEST COLONIAL DRIVE
ORLANDO FL 32808**

10. Name and Address of New Registered Agent

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 607.05(2) and 607.05(3), Florida Statutes, the above named corporation submits this statement for the purpose of electing its registered office or registered agent for the State of Florida. Such change was authorized by the corporation's board of directors, if elected, except the appointment of a registered agent, if an individual, and accept the obligations of Section 607.05(3), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12a

**DP
BREWSTER, JONATHAN ALAN
210 DUNCAN TRAIL
LONGWOOD FL**

NAME

STREET ADDRESS

CITY, STATE, ZIP

12b

NAME

STREET ADDRESS

CITY, STATE, ZIP

12c

NAME

STREET ADDRESS

CITY, STATE, ZIP

12d

NAME

STREET ADDRESS

CITY, STATE, ZIP

12e

NAME

STREET ADDRESS

CITY, STATE, ZIP

12f

NAME

STREET ADDRESS

CITY, STATE, ZIP

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

13a

1. NAME

2. STREET ADDRESS

3. CITY, STATE, ZIP

4. TITLE

5. NAME

6. STREET ADDRESS

7. CITY, STATE, ZIP

8. TITLE

9. NAME

10. STREET ADDRESS

11. CITY, STATE, ZIP

12. TITLE

13. NAME

14. STREET ADDRESS

15. CITY, STATE, ZIP

16. TITLE

17. NAME

18. STREET ADDRESS

19. CITY, STATE, ZIP

20. TITLE

21. NAME

22. STREET ADDRESS

23. CITY, STATE, ZIP

14. I, the undersigned, certify that the information supplied with this filing is, to the best of my knowledge and belief, true and correct, and that my signature shall have the same legal effect as if such person had signed the information in person. I am an officer or director of the corporation, or have been an officer or director of the corporation, and I am authorized to execute this report as required by Chapter 190, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on any attachment with my name.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/95

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED

DOCUMENT # **J13396** (3)

1. Corporation Name

BEUT REALTY CORP.

Principal Place of Business

Mailing Address

**4800 16TH STREET
VERO BEACH FL 32960**

**% MANGER MANAGEMENT
25 THRD ST., PO BOX 3226
STAMFORD CT 06905**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/08/1986

3a. Date of Last Report

02/03/1994

4. FET Number

06-1195347

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 has liability for intangible tax under S. 199.012,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. State, April 1, 1995

26. State, April 1, 1995

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. State, April 1, 1995

Country

29. State, April 1, 1995

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BEUTTELL, ISABELLE M
4800 16TH STREET
VERO BEACH FL 32960**

81. Name

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

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, in both of 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 607.0508, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent's Representative)

(Signature of Registered Agent or Registered Agent's Representative)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1.

NAME	DPT BEUTTELL, ISABELLE M.
STREET ADDRESS	4800 ROSEWOOD BLVD.
CITY & STATE	VERO BEACH FL
NAME	DVS BARBEY, LILLIAN M.
STREET ADDRESS	570 PARK AVE.
CITY & STATE	NEW YORK NY
NAME	
STREET ADDRESS	
CITY & STATE	
NAME	
STREET ADDRESS	
CITY & STATE	
NAME	
STREET ADDRESS	
CITY & STATE	
NAME	
STREET ADDRESS	
CITY & STATE	

NAME	☐ Change ☒ Addition
STREET ADDRESS	
CITY & STATE	ZIP = 32960
NAME	☐ Change ☒ Addition
STREET ADDRESS	
CITY & STATE	ZIP = 10021
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY & STATE	
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY & STATE	
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY & STATE	
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY & STATE	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in the first 1995 Florida Statutes. Further, I certify that the information included 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 owner or holder of securities of the corporation as required by Chapter 407, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or as an attachment with an address.

SIGNATURE: **X** *Isabelle M. Beutell*
ISABELLE M. BEUTTELL, PRESIDENT
4/30/95 (407) 567-0586