

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0014205

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
99 AUG 17 AM 8:32

DOCUMENT # **J86950**

1. Corporation Name
PHILLIPS MOTORS, INC.

Principal Place of Business

**3143 SO ORANGE AVE
ORLANDO FL 32806
US**

Mailing Address

**3143 S. ORANGE AVE.
PO BOX 568338
ORLANDO FL 32806
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/06/1987

4. FEI Number

59-2853180

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 ☐ 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 Country

28 Zip Country

24 25 29 30
9. Name and Address of Current Registered Agent

**PHILLIPS, WILLIAM M.
3143 S ORANGE AVE
ORLANDO FL 32806**

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 607.0502 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 **PD** ☐ DELETE

NAME **PHILLIPS, W. M.**
STREET ADDRESS **3111 AUTUMNWOOD TRAIL**
CITY-ST-ZIP **APOPKA FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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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

11 TITLE ☐ Change ☐ Addition

12 NAME **300002967653--0**

13 STREET ADDRESS **-08/24/99--01010--008**

14 CITY-ST-ZIP ******150.00 ****150.00**

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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.

SIGNATURE: **William M. Phillips** **WILLIAM M. Phillips** **8-11-99** **#07-855-0902**

CR2E034 (5/99)

Phillips Motors Inc.
3143 S. Orange Ave.
Orlando, FL. 32806
(407) 855-0902

8-11-99

Att: SEAN TOWER:

Per our conversation of today by
phone, we did not get the first
notice at all; apparently it went
to this P.O. Box also, which is
not ours - we have no P.O. -
Please find enclosed our check
Per your instructions

Phillips Motors, Inc.
Wm Phillips, Pres.