

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J90961

1. Entity Name
APOLLO BEACH AUTOS, INC.



Principal Place of Business

**5801 US HWY 41 N
APOLLO BEACH, FL 33572 US**

Mailing Address

**5801 US HWY 41 NORTH
APOLLO BEACH, FL 33572 US**

FILED
Apr 20, 2004 08:00 AM
Secretary of State



04162004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2846683

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HOLMES, ROBERT D.
5801 US HWY 41 N
APOLLO BEACH, FL 33572**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PT HOLMES, ROBERT D. 5801 US HWY 41 N APOLLO BEACH, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VS HOLMES, VIRGINIA 5801 US HWY 41 N APOLLO BEACH, FL |
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04/20/04-80043-006 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Virginia S. Holmes* **VIRGINIA S. HOLMES**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/04

Date

813-645-4638

Daytime Phone #