

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Cynthia B. McMan
Secretary of State
1900 Bay Parkway, Suite 400, Fort Lauderdale, FL 33304

APPROVED

DOCUMENT # J97135

(4)

NEPTUNE MOTORS OF PINELLAS COUNTY, INC.

1. Name of Corporation: **% JAMES F. IZZOLO**
2. Mailing Address: **6761 ULMERTON ROAD 13274 92ND ST. NO LARGO FL 34641**

2. Mailing Address: **% JAMES F. IZZOLO**
3. Mailing Address: **6761 ULMERTON ROAD SAME LARGO FL 34641**

3. Date of Corporation: **10/07/1987**
3b. Date of Last Report: **04/04/1994**
4. Filing Number: **59-2848017**
5. Indicate if Status is: ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing: ☐ **\$5.00 May Be Added to Fees**
7. This corporation has liability for the intangible tax under S. 190.032: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
IZZOLO, JAMES F.
6761 ULMERTON ROAD 13274 92ND ST. NO
LARGO FL 34641

10. Name and Address of New Registered Agent
81. Name:
82. Street Address (P.O. Box Number is Not Acceptable):
83. City:
84. City: **FL** 85. Zip Code:

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation submits this statement for the purpose of changing its registered office to the address set forth in the State of Florida. Such change was authorized by the corporation's board of directors, majority in control, and the appointment of a registered agent. I am further authorized to accept the appointment of a new registered agent for the corporation.

Signature: _____ Date: _____

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
1. NAME: IZZOLO, JAMES F. 2. STREET ADDRESS: 6761 ULMERTON ROAD 13274 92ND ST. NO 3. CITY: LARGO FL	1. NAME: ☐ Change ☐ Addition 2. NAME: ☐ Change ☐ Addition 3. NAME: ☐ Change ☐ Addition 4. NAME: ☐ Change ☐ Addition 5. NAME: ☐ Change ☐ Addition 6. NAME: ☐ Change ☐ Addition 7. NAME: ☐ Change ☐ Addition 8. NAME: ☐ Change ☐ Addition 9. NAME: ☐ Change ☐ Addition 10. NAME: ☐ Change ☐ Addition 11. NAME: ☐ Change ☐ Addition 12. NAME: ☐ Change ☐ Addition 13. NAME: ☐ Change ☐ Addition 14. NAME: ☐ Change ☐ Addition 15. NAME: ☐ Change ☐ Addition 16. NAME: ☐ Change ☐ Addition 17. NAME: ☐ Change ☐ Addition 18. NAME: ☐ Change ☐ Addition 19. NAME: ☐ Change ☐ Addition 20. NAME: ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.032, Florida Statutes. I further certify that the information furnished on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath. I am aware of the consequences for false or misleading information on this report and the consequences for non-compliance with the provisions of Section 190.032, Florida Statutes, and that my signature appears on Block 13 of this report as an officer or director.

SIGNATURE: **James F. Izzolo**
5/3/95 (813) 588-4444
002147 CP