05-05-1999 90141 037 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # K07898

1. Corporation Name

ACTION TRANSMISSION OF JACKSONVILLE, INC.

							iali: Elle:	
Principal Place of Business Mailing Address						ill 84914 BIBIL BIBIA BI	(B)) B(11)   BB	
% ROGER E. WHITE		% ROGER E. WHITE	% ROGER E. WHITE					
6015 MERRILL RD.		6015 MERRILL RD.	6015 MERRILL RD.		DO NOT WRITE IN THIS SPACE			
JACKSONVILLE FL 32211		JACKSONVILLE FL 32211	JACKSONVILLE FL 32211		3. Date Incorporated or Qualifed	DO NOT WRITE IN THIS SPACE		
					01/01/1988			
2 Principal D	loca of Business	2a. Mailing Address			4. FEI Number	Apr	plied For	
2. Principal Place of Business		26	<b>⊢</b> *		59-2862795	<del></del>	t Applicable	
21   2   2   2   2   2   2   2   2   2		Suite, Apt. #, etc.				\$8.75 <sub>.</sub> A		
27		27	·		5. Certifcate of Status Desired	Fee Red	quired	
City & State		City & State			6. Election Campaign Financing	\$5.00		
23		28			Trust Fund Contribution	Added to	ງ Fees	
Zip Country Zip		`	Country	1	8. This corporation owes the current year		r=7	
24	25	29 30	0		Personal Property Tax.	_/>	□No	
N5	9. Name and Address of Cu	rrent Registered Agent	81	Name	10. Name and Address of New Register	ad Agent		
∴§* WHO	re, roger e.		"	Name				
6015 MERRILL RD.			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)			
JACKSONVILLE FL 32211			83					
<i>3,</i> (3)	ACOMMENT OF SECTION		"					
			84	City	F	85 Zip C	;ode	
11. Pursuant	to the provisions of Sections 607.	.0502 and 607.1508, Florida Statutes	, the abov	e-named co	orporation submits this statement for the purpose	of changing its	registered	
office or re	egistered agent, or both, in the St	tate of Florida. Such change was auth oligations of, Section 607.0505, Florid	norized by	the corpora	ation's board of directors. I hereby accept the ap	pointment as reg	jistered	
	in tarinia wai, and accept we or	Alganotic St, Coston Coston I total						
SIGNATURE	Signature, typed or printed name of registered	d agent and title if applicable. (NOTE: Ro	egistered Age	nt signature requ	uired when reinstating) DATE			
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	<del></del>		
TITLE	DP	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition	
NAME	WHITE, ROGER E.		1.2 NAME				í	
STREET ADDRESS	6015 MERRILL RD.		1.3 STREE	TADDRESS				
CITY-\$T-ZIP	JACKSONVILLE FL		14 CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE	VS	☐ DELETE	2.1 TITLE			□ Change		
NAME	WHITE, JOANN		2.2 NAME					
STREET ADDRESS	6015 MERRILL RD		ii.	TADDRESS			İ	
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY-:	ST-ZIP		☐ Change	Addition	
TITLE		<u></u>	3.2 NAME					
NAME STREET ADDRESS			1	T ADDRESS				
			3.4. CITY-1					
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	31-21		☐ Change	☐ Addition	
NAME		<del>-</del>	4. 2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP				ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE	,, <u>L</u> ,,		☐ Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS			;	
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition	
	}							

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, with all other like empowered.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP