

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 10:17

DOCUMENT # K49816

(7)

1. Corporation Name

J & B AUTO OF PINELLAS INC.

Principal Place of Business

% WILLIAM H. BULLARD
2575 ULMERTON RD STE 302
CLEARWATER FL 34622
US

Mailing Address

% WILLIAM H. BULLARD
2575 ULMERTON RD #302
CLEARWATER FL 34622
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/07/1988

3a. Date of Last Report

03/21/1994

4. FEI Number

59-2920583

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. 199.032,
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

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State, Apt. #, etc.

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City & State

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Zip

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Country

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2a. Mailing Address

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State, Apt. #, etc.

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City & State

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Zip

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Country

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BULLARD, WILLIAM H.
2575 ULMERTON RD STE 302
CLEARWATER FL 34622

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 of registered agent or authorized officer and the fee shall be)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY - ST - ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY - ST - ZIP

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SIGNATURE:

SIGNATURE AND TYPE ON PAGE TWO NAME OF REGISTERED AGENT OR DIRECTOR

030395 9135735077