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Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K98143 (6)

1. Corporation Name
SCOTT'S AUTO REPAIR, INC.



Principal Place of Business
% JACK SCOTT
7109 WESTMORELAND DRIVE
SARASOTA FL 34243

Mailing Address
% JACK SCOTT
7109 WESTMORELAND DRIVE
SARASOTA FL 34243-1434

3. Date Incorporated or Qualified 06/26/1989
3a. Date of Last Report 02/06/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	65-0131224	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	☐	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	☐	
Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☒ Yes ☐ No
24	25	29	30

9. Name and Address of Current Registered Agent

SCOTT, JACK
7109 WESTMORELAND DRIVE
SARASOTA FL 34243

10. Name and Address of New Registered Agent

81 Name JEFF SCOTT
82 Street Address (P.O. Box Number is Not Acceptable) 820 PENNSYLVANIA AVE
83
84 City SARASOTA FL 85 Zip Code 34243

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 PRESIDENT

1/18/97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	SCOTT, JACK	1.2 NAME	
STREET ADDRESS	7109 WESTMORELAND DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	☐ Change ☐ Addition
NAME	SCOTT, JEFF	2.2 NAME	
STREET ADDRESS	618 CHEVY CHASE DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34243	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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:

JEFF SCOTT P

1/18/97 941-355-3110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0431853

CR2E034 (9/96)