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 # **L34176** 1. Corporation Name

LLOYD NISSAN, INC.

	•									
Principal Place of Business Mailing Address						()441/41 444 (11) FIRE! (18) 1886 21) AIGH	#1#11 B16			
% R.L. LLOYD. JR. % R.L. LLOYD. JR. 100 EAST 23RD STREET 100 EAST 23RD STREET PANAMA CITY FL 32405-4502 PANAMA CITY FL 32405-450			02			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed 12/06/1989				
Principal Place of Business 2a. Mailing Address						4. FEI Number				
21 26						59-2979897	Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State - City & State				_		6. Election Campaign Financing		5:00 h	•	-
23 28			Country			Trust Fund Contribution		dded to	Fees	d
Zip	Country Zip 25 29 30			у		8. This corporation owes the current year Intangible Personal Property Tax. Yes No				
24	9. Name and Address of Current	1771	30			10. Name and Address of New Registered				1
			8	1	Name]
LLOYD, R.L., JR. 100 EAST 23RD STREET			8	2	Street Addre	ress (P.O. Box Number is Not Acceptable)				1
PANAMA CITY FL 32405			8	3		A				1
			8	4	City	,,-u-,	85	Zip C	ode	$\frac{1}{2}$
				\perp		<u>F</u> I				-
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of im familiar with, and accept the obligat	of Florida. Such change was au	Jihonzed b	v u	ine corporatior	ration submits this statement for the purpose on's board of directors. I hereby accept the appears	t chang pintment	ing its r t as reg	registered iistered	
SIGNATURE										}
Signature, typed or printed name of registered agent and title if applicable. (NOTE: I OFFICERS AND DIRECTORS			Registered Ag	jent	signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PD DELETE		1.1 TITLE	 :		7,001110110701111101110111011		hange	Addition	1
NAME	LLOYD, R.L., JR.			Ē						
STREET ADDRESS	100 F10T 00D 0T			E7/	ADDRESS					
C/TY-ST-ZIP	PANAMA CITY FL		1.4 CITY-ST-ZIP		-ZIP					1
TITLE	VSD			2.1 TITLE			□ Ct	hange	☐ Addition	
NAME	LLOYD, EUGENIA P.			E						
STREET ADDRESS 714 BUNKERS COVER ROAD			2.3 STREET ADDRESS							
CITY-ST-ZIP	PANAMA CITY FL				T-ZIP			hange	Addition	┤═
TITLE		☐ nerete	3.1 TITLE				□ •	atrige		
NAME				3.2 NAME 3.3 STREET ADDRESS						
STREET ADDRESS	1			3.4. CITY-ST-ZIP						
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE		1-217			hange	Addition	1
NAME			4. 2 NAME							Ì
STREET ADDRESS			4.3 STRE	4.3 STREET ADORESS						
CITY-ST-ZIP			4.4 CITY-5		-ZIP					
TITLE	☐ DELETE		1	5.1 ΠΤLË				hange	☐ Addition	
NAME	\ 		5.2 NAM							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITIF DELETE			5.4 CITY 6.1 TITLE		-ZIP		<u> </u>	hange	Addition	-
I TITLE	1	U DETELE		-	1				Land Francisco	1

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

850-7636575

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90010 007 ***150.00