## 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 #**

1. Corporation Name

Charlotte County Lincoln-Mercury, Inc.

**FILED** Jun 24, 1999 8:00 am Secretary of State

06-24-1999 90022 030 \*\*\*158.75

Principal Place of Business	Mailing	Address			1			
2021 S. Tam	iami Tmil	P.O. Box	150	820				
·			•		DO NOT WRITE IN THIS SPACE			
Punta Gorda, FZ. 33950 Cape Con				33415	3. Date Incorporated or Qualifed			
					12/22/89			
2. Principal Place of Business	2a. Mail	ing Address			4. FEI Number		T A	pplied For
21	26				65-016728	38	N	lot Applicable
Suite, Apt. #, etc.	Suite	e, Apt. #, etc.			5. Certificate of Status Desired			Additional
22	27				<b>0.</b> Continued to 0.			Required
City & State	—	& State			6. Election Campaign Financi	ng 🗆		May Be
23	28		Country		Trust Fund.Contribution			I.to Fees
Zip Coul	<u> </u>	[m]	Country	٠	This corporation owes the operation of the Personal Property Tax.	current year Int	tangible Dires	□No
24 25 9 Name and Add	29 29 29 29 29 29 29 29 29 29 29 29 29 2	30			10. Name and Address of Ne	w Registered		
	^	- Agent	81	Name		, ]		
Williams, Barbara				Steven L. Westphal				
		ort ses	82	Street Addre	ss (P.O. Box Number is Not Acc	spiable)		
34.79 7	1 /1 / 1 11	6.16360	83		- D 1 D 1 D	10		
Gary Fronrath Enterprises 4901 N. Federal Hwy, Soite 350					07 Del Prado B	100.	Top City	Codo
Ft. Lac	uderdale, FL. 3	33 <i>0</i> 8	84	City Ca	pe Coral	FL	85 Zip	Code 3 904
11. Pursuant to the provisions of S	ections 607.0502 and 607.15	08, Florida Statutes, t	he above	-named corno	ration submits this statement for	the purpose of	changing it	s registered
I office or registered agent, or bo	oth, in the State of Florida, Su	ich change was authoi	rized by 1	the corporation	n's board of directors. I hereby ac	cept the appoi	ntment as n	agistered
agent. I am familiar with, and a			_			6/7/9	9	
SIGNATURE Signature typed or printed name of registers digent and title if applicable. (NOTE: Registered Agent signature required w						DATE		
12.	OFFICERS AND DIRECTOR		13.		ADDITIONS/CHANGES TO	OFFICERS AN		
TITLE DVP.	<i>~</i> , ,	☐ DELETE	1.1 TITLE				☐ Change	Addition
NAME   Westphal,	Steven L miani Trail		1.2 NAME					
STREET ADDRESS 2021 S. Ta	miani Trail	1	1.3 STREET	ADDRESS				1
	rda, FL. 33950		1,4 CITY-ST	-ZIP			Change	Addition
™LE DP			2.1 TITLE				Change	L. Addition
STREET ADDRESS 1300 N. Fee	Gary, ,		2.2 NAME					
			2.3 STREET		_			
CITY-ST-ZIP Ft. Lauder	Agle PL. 30300		2. 4 CITY-ST 3.1 TITLE	1-ZIP	<u> </u>		Change	Addition
NAME - DS		<del></del>	3.2 NAME					_
001111	, barbara	•	3.3 STREET	ADDRESS				}
CITY-ST-ZIP Ft. Lauden	deral Hwy. dale, FL. 33304	i	3.4. CITY- ST					1
TITLE	X-010/1 C/ -000 I		4.1 TITLE	<del></del>			☐ Change	Addition
NAME		Į.	4,2 NAME					
STREET ADDRESS		ł	4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST	-ZIP				
TITLE			5.1 TITLE				Change	☐ Addition
NAME		1	5.2 NAME					
STREET ADORESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST	-ZIP	<u></u>			
ΠLE			6.1 TITLE				Change	☐ Addition
NAME			6.2 NAME	_ {				
STREET ADDRESS			6.3 STREET					
CITY-ST-ZIP		<b>_</b>	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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

L38012 579786-90022-30

## CHARLOTTE COUNTY LINCOLN-MERCURY, INC.

P.O. BOX 150820 CAPE CORAL, FL. 33915

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL. 32314 June 7,1999

To Whom it Concerns:

Charlotte County Lincoln-Mercury, Inc. ceased business operations in December of 1998. Since that time our old POBox had been closed and as a result of this we did not receive our Profit Corporation Annual Report form. In light of these circumstances we hereby cordially request that the State waive the \$400 late fee.

Thank you in advance for your consideration in this matter.

Very Truly Yours,

Steven L. Westpha Vice President