FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -3 PM 5:53

DOCUMENT # **L62969** **(5)**

1. Corporation Name
CAR TOWN, INC.

Principal Place of Business	Mailing Address
% JOHN G. WEBB 2880 CENTRAL AVENUE ST. PETERSBURG FL 33712	4450 GULF BLVD STE 309 ST PETERSBURG FL 33706 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/28/1990	3a. Date of Last Report: 03/31/1994
4. FEI Number: 59-3002062	☐ 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	2a. Mailing Address
21 2880 Central Avenue	26 2880 Central Avenue
Suite, Apt. #, etc: 22	Suite, Apt. #, etc: 27
City & State: 23 St. Petersburg, FL	City & State: 28 St. Petersburg, FL
Zip: 24 33712 Country: 25 Pinellas	Zip: 29 33712 Country: 30 Pinellas

9. Name and Address of Current Registered Agent

WEBB, JOHN G.
2880 CENTRAL AVENUE
ST. PETERSBURG FL 33712

10. Name and Address of New Registered Agent

81 Name: Christine Ann Folkers
82 Street Address (P.O. Box Number is Not Acceptable): 2880 Central Avenue
83:
84 City: St. Petersburg FL 85 Zip Code: 33712

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: Christine A. Folkers 3/29/95
Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	P ☒ Change ☐ Addition
NAME	WEBB, JOHN G.	12 NAME	Christine Ann Folkers
STREET ADDRESS	4450 GULF BLVD	13 STREET ADDRESS	2880 Central Avenue
CITY ST ZIP	ST. PETERSBURG FL	14 CITY ST ZIP	St. Petersburg, FL 33712
TITLE	ST	21 TITLE	ST ☒ Change ☐ Addition
NAME	WEBB, MICHAEL	22 NAME	William Fredrick Folkers
STREET ADDRESS	4450 GULF BLVD	23 STREET ADDRESS	2880 Central Avenue
CITY ST ZIP	ST. PETERSBURG FL	24 CITY ST ZIP	St. Petersburg, FL 33712
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Christine A. Folkers, pres — 3/29/95 — 323-2065
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

0907R00 CP