

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00CORPORATION
ANNUAL REPORT
1995FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONSFILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 19 PM 1:00

DOCUMENT # L76141

(5)

1. Corporation Name

TOWERVIEW MOTORS, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
05/25/19903a. Date of Last Report
04/22/19944. FEI Number
59-3015782Applied For
Not Applicable

5. Certificate of Status Desired

☒\$9.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes☒ Yes ☐ No2. Principal Place of Business
21 1850 US Hwy 27 North

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 Lake Wales, FL

24 Zip
3385325 Country
USA

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

SCHIELKA, LEE, JR.
2009 OLIVER PL NW
WINTER HAVEN FL 33881

10. Name and Address of New Registered Agent

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, hand or typed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	SCHIELKA, LEE, JR.
STREET ADDRESS	2009 OLIVER PL NW
CITY - ST - ZIP	WINTER HAVEN FL
TITLE	D
NAME	WOOD, PAUL, JR.
STREET ADDRESS	506 ORANGE BLOSSOM SE
CITY - ST - ZIP	WINTER HAVEN FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or voluntary annual report is true and accurate and that my signature shall have the same legal effect as it makes 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 an agent, officer or director with an address.

SIGNATURE: LEE SCHIELKA, JR. 1/11/95 813-676-8999
Signature AND TYPED ON PRINTED NAME OF BOARD OFFICER OR DIRECTOR