

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M67772 (7)

1. Corporation Name

KEITH'S GARAGE OF TAMPA, INCORPORATED

Principal Place of Business

14305 N. NEBRASKA AVE.
TAMPA FL 33613
US

Mailing Address

P.O. BOX 208513
TAMPA FL 33682
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

BECKER, TERRY
16004 AMBERLY DR.
TAMPA FL 33647

3. Date Incorporated or Qualified
02/05/1988

3a. Date of Last Report
02/08/1995

4. FEI Number
59-2867384

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

10. Name and Address of New Registered Agent

81 Name

Ronnie Lee Triplett

82

Street Address (P.O. Box Number is Not Acceptable)

17013 Aspen Meadows

83

84

City
Lutz

FL

85

Zip Code
33549

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

Ronnie Lee Triplett

Signature, typed or printed name of registered agent, if not applicable

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD

BECKER, TERRY
16004 AMBERLY DR.
TAMPA FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VDS

BECKER, TERRY
16004 AMBERLY DR.
TAMPA FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TD

BECKER, TERRY
16004 AMBERLY DRIVE
TAMPA FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

President/Treasurer/Director

☐ Change

☒ Addition

1.2 NAME

Ronnie Lee Triplett

1.3 STREET ADDRESS

17013 Aspen Meadows

1.4 CITY-ST-ZIP

Lutz, FL 33549

2.1 TITLE

V-President/Secretary/Director

☐ Change

☒ Addition

2.2 NAME

Donald Lee Dueker, Jr.

2.3 STREET ADDRESS

2994 Bonaventure Circle

2.4 CITY-ST-ZIP

Palm Harbor, FL 34684

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 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

4/25/96 813-971-3576

CR2E034 (12/95)