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 M83328

ROAD MART OF FLORIDA, INC.

Principal Place of Business	Mailing Address	
2413 S. HWY. 77 LYNN HAVEN FL 32444	2413 S. HWY. 77 Lynn haven Fl 32444	

FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90009 026 ***150.00



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Principal Place	of Business	Mailing Address									
2413 S. HWY. 7	7	2413 S. HWY, 77				1			-		
LYNN HAVEN FL 32444 LYNN HAVEN FL 32444							DO NOT WRITE IN THIS SPACE				
						3	Date Incorporated or Qualifed			7	
							05/26/1988			pplied For	
2. Principal Pl	ace of Business	2a. Mailing Address				1 1	FEI Number		_ '		
21		26					<u>59-2893506</u>			ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certificate of Status Desired]	३8.73 Fee R∈	Additional	
22		27							Fee R	equired	
City & State	•	City & State				6.	Election Campaign Financing	1		May Be	
23		28					Trust Fund Contribution			to Fees	
Zip	Country	Zip	Cou	ntry		8.	This corporation owes the current	year Intang	gible		
24	25	29	30		_		Personal Property Tax.		Yes	No	
	9. Name and Address of Currer	nt Registered Agent				10.	Name and Address of New Regi	stered Ag	ent		
				81	Name A	۱۱ :ام	is Coulliette				
cou	LLIETTE, WILLIS			-	<u> </u>	A / 11 / 1 /	O. Box Number is Not Acceptable				
	GREENBRIAR BLVD.			82		iress (P.	E.ZG-19 St.	,		ì	
1	N HAVEN FL 32444			83							
	1 1 1 1 1 2 3 2 1 1 1										
				84	City		Mayon	FL	85 Zip	Code 2444	
				L_l		ynn	Hayen				
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida Statu	tes, the a	bove	e-named corp	rporation	submits this statement for the pur and of directors. I hereby accept th	pose or cri e appointn	anging its nent as re	egistered	
office or re	egistered agent, or both, in the State in familiar with, and accept the obliga	ations of, Section 607.0505, Fl	orida Stat	utes.		4011000	and of an octorer ,			_	
	, ransmar start esse accept the start	•									
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOT	E: Registered	Agen	t signature requir	red when re		DATE			
12.		ND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFIC				
TITLE	D	☐ DELETE	1.1 TI	πE		Presid	dent	į,	Change	☐ Addition	
NAME	COULIETTE, WILLIS		1.2 N	ME	1	Poulli	ette, Willis				
	2024 GREENBRIAR BLVD.		1.3 \$	REET	ADDRESS	1100	E ZGT St.				
STREET ADDRESS	LYNN HAVEN FL			TY-S1		Lynn	Haven FL 32444				
CITY-ST-ZIP	- 	☐ DELETÉ	2.1 TI		้)	7,000		Change	Addition	
! TITLE	D		2.2 NAME		0.	- 11° -	tte, Elizabeth N				
NAME	COULIETTE, ELIZABETH N.		I			100 6	7. 26th St.				
STREET ADDRESS	2024 GREENBRIAR BLVD.				ADDRESS \	100	Haven FL 32444				
CITY-ST-ZIP	LYNN HAVEN FL				T-ZIP L	<u>-yan</u>	Haven FL 32444		\ Change	Addition	
TITLE		☐ DELETE	3.1 T	ΠE				Ę	_1 Gridinge	L. 10010011	
NAME			3.2 N	AME							
STREET ADDRESS			3.3 S	REET	ADDRESS						
CITY-ST-ZIP			3.4. 0	ITY-S	T-ZIP						
TITLE		☐ DELETE	4.1 T					ĺ	Change	☐ Addition	
NAME			4.21	AME	ļ						
1			4.3 STF		ADORESS						
STREET ADDRESS											
CITY-ST-ZIP		☐ DELETE	5.1 T	TY-\$ TIF	···				Change	☐ Addition	
TITLE			5.1 N		ļ			_			
NAME					T ADDRESS						
STREET ADDRESS	l				1						
CITY-ST-ZIP				TY-S	1-41				Change	Addition	
TITLE		☐ DELETE	6.1 1					1	change		
NAME			6.2 N								
STREET ADDRESS			6.3 S	TREET	TADDRESS						
1					Í						

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 comporation 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 chapter 607, or on an attachment with an address, with all other like empowered. CITY-ST-ZIP

SIGNATURE: