

2nd NOTICE: Limited Liability Company Will Be Dissolved On Or After October 8, 1997. If Dissolved, Minimum Amount Due To Reinstate: \$703.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

97 SEP -2 PM 2:03

FILED

LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT

1997

DOCUMENT # M96000000249

FILING FEE Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee + \$385.00 Late Fee

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company

SELECTRUCKS OF TAMPA L.L.C.
~~6308 HILLSBOROUGH~~
TAMPA FL 33610

GA-AR
CM

1a. Principal Place of Business Address
6308 HILLSBOROUGH
TAMPA FL 33610

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

3a. State of Formation

07/11/1996

DE

4. FEI Number

☐ Applied For

☐ Not Applicable

93-1209222

5. Date of Last Report

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

Suite, Apt. #, etc.

City

Zip Code

FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title Managing Members/Managers Business Street Address City, State and Zip Code

MGR GUNTER, J R

6308 HILLSBOROUGH

TAMPA FL

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-09/05/97--01094--009
****203.75 ****203.75

11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: J. R. Gunter

[Signature]

813-630-0205

2012



PHONE: (813) 630-0205
FAX: (813) 630-0160
TOLL FREE: (888) 735-8785

SELECTRUCK OF TAMPA
6302 E. HILLSBOROUGH
TAMPA, FL 33610

August 15, 1997

Division of Corporations
Annual Reports Section
P.O. Box 6327
Tallahassee, FL 32314

FILED
97 SEP -2 PM 2: 03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir,

Enclosed is our check for \$165.00 representing the Filing Fee for our annual report. We spoke to your office and since we did not receive the first notice sent by your office your office agreed not to charge a late fee.

Thank you,

J. R. Gunter
General Manager