

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 09, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000033832

1. Entity Name
T&R AUTO REPAIR, INC.



Principal Place of Business

801 ATLANTIC BLVD.
ATLANTIC BEACH, FL 32233

Mailing Address

801 ATLANTIC BLVD.
ATLANTIC BEACH, FL 32233



01172004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3636573

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ELKINS, J.H. JR.
720 ST JOHNS BLUFF N #4
JACKSONVILLE, FL 32225

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *

*Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PT
ESSICK, TERRY M
801 ATLANTIC BLVD
ATLANTIC BEACH, FL 32233

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPS
NEWSOME, RUSSELL V
801 ATLANTIC BLVD
ATLANTIC BEACH, FL 32233

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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02/09/04-80102-018 150.00

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Terry M. Essick
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/04 904249-5711
Date Daytime Phone #