

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90188 041 ***150.00

DOCUMENT # P01000075937

1. Entity Name
APPLE TIRE CO.

Principal Place of Business
1005 N MCDUFF AVE
JACKSONVILLE FL 32254

Mailing Address
1005 N MCDUFF AVE
JACKSONVILLE FL 32254

2. Principal Place of Business
APPLE TIRE CO.

3. Mailing Address
1005 N. MCDUFF AVE.

Suite, Apt. #, etc.
0

Suite, Apt. #, etc.
0

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3731430

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

KIMBRELL, JERRY
1005 N MCDUFF AVE
JACKSONVILLE FL 32254

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE: **Jerry R. Kimbrell**

(NOTE: Registered Agent signature required when reinstating)

4-10-01

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

OWNER
Jerry R. Kimbrell ☐ Delete
2847 W. 7TH STREET
JACKSONVILLE, FLORIDA 32254

OWNER
JOHNNY R. Kimbrell ☐ Delete
2855 W. 7TH STREET
JACKSONVILLE, FLORIDA 32254

☐ 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
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Jerry R. Kimbrell** **4-10-02 904359-1228**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)