

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90679 017 ***150.00

DOCUMENT # P02000020591

1. Entity Name

C & K AUTOMOTIVE, INC.



Principal Place of Business

10329 ATLANTIC BLVD.
JACKSONVILLE FL 32225
US

Mailing Address

10329 ATLANTIC BLVD.
JACKSONVILLE FL 32225
US

94079184



MOORE CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

36-4489206

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOWELL, MELISSA J
562 STAFFORDSHIRE DR. E.
JACKSONVILLE FL 32225

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. 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
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME DANIELS, FREDDIE S
STREET ADDRESS 199-C OWL CREEK RD
CITY-ST-ZIP SAINT AUGUSTINE FL 32092

TITLE VPD ☐ Delete
NAME DANIELS, JOHN A
STREET ADDRESS 14080 TONTINE RD.
CITY-ST-ZIP JACKSONVILLE FL 32225

TITLE STD ☐ Delete
NAME HOWELL, MELISSA J
STREET ADDRESS 562 STAFFORDSHIRE DR. E.
CITY-ST-ZIP JACKSONVILLE FL 32225

TITLE D ☐ Delete
NAME DANIELS, FREDDIE
STREET ADDRESS 14080 TONTINE ROAD
CITY-ST-ZIP JACKSONVILLE FL 32225

TITLE D ☒ Delete
NAME MERRITT, KEVIN
STREET ADDRESS 10329 ATLANTIC BLVD.
CITY-ST-ZIP JACKSONVILLE FL 32225

TITLE ☐ Delete
NAME ALLEN THOMAS (D)
STREET ADDRESS 36501 TASY LANE
CITY-ST-ZIP MALLAHAN FL 32011

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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: *Freddie S. Daniels*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/27/04 646-2929