

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1-2.

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P08336

(0)

1. Corporation Name

TIRE CENTERS, INC.



Principal Place of Business

300 N. CLEVELAND-MASSILLON RD., SUITE 200
AKRON OH 44333-2484
US

Mailing Address

300 N. CLEVELAND-MASSILLON RD., SUITE 200
AKRON OH 44333-2484
US

3. Date Incorporated or Qualified
12/09/1985

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number
34-1492712

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	BERLIN, JAMES	
STREET ADDRESS	22656 CARAVELLE CIRCLE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	BERLIN, JAMES	
STREET ADDRESS	22656 CARAVELLE CIRCLE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HALL, RICHARD L.	
STREET ADDRESS	4190 ALICIA TRAIL	
CITY-ST-ZIP	STOW OH	
TITLE	VPST	<input type="checkbox"/> DELETE
NAME	LAWRENCE, TERRY A.	
STREET ADDRESS	4219 BIG SPRUCE	
CITY-ST-ZIP	AKRON OH	
TITLE	AST	<input type="checkbox"/> DELETE
NAME	BERLIN, MADELINE	
STREET ADDRESS	22656 CARAVELLE CIRCLE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	SNYDER, DAVID	
STREET ADDRESS	3439 SADDLEBORO DRIVE	
CITY-ST-ZIP	UNIONTOWN OH	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TERRY A. LAWRENCE, VP/SEC/TREA

Date:

(330) 668-8808
Daytime Phone #

CR2E034 (12/95)

TIRE CENTERS, INC. OFFICERS

JAMES BERLIN
22656 Caravelle Circle
Boca Raton, FL 33433

Chairman of the Board and
Chief Executive Officer-
Director and President

RICHARD HALL
4190 Alicia Trail
Stow, OH 44224

Vice President

TERRY LAWRENCE
4219 Big Spruce
Akron, OH 44333

Vice President
and Secretary/
Treasurer

DAVID SNYDER
3439 Saddleboro Drive
Uniontown, OH 44685

Vice President

MADELINE BERLIN
22656 Caravelle Circle
Boca Raton, FL 33433

Asst. Secretary
and Asst. Treasurer-
Director

JUDITH L. ROMAN
2043 Meadow Gate
Akron, OH 44313

Vice-President

RONALD J. CAPOROSSO
3831 Dodds Hills Dr.
Willoughby Hills, OH 44094

Vice-President

ROBERT M. BERLIN
5 Parker Street
Newton, MA 02159

Director

ROBIN I. KANE
22870 Canterbury Lane
Shaker Heights, OH 44122

Director

Incorporated State of Ohio 10/15/85

FBI #34-1492712

03/19/96
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