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PROFIT CORPORATION ANNUAL REPORT

1999

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P14398

SUNBELT TIRE MARKETERS, INC.

May 17, 1999 8:00 am Secretary of State

05-17-1999 90085 045 ***158.75

Principal Place of Business Mailing Address								
207	Nostmata DD Unit #	21					•	
2512 Westgate DR Unit # 21					DO NOT W	RITE IN THIS	SPACE	
Albany, GA 31707						3. Date Incorporated or Qualifed		
					May 11, 1987			
2. Principal Place of Business 2a. Mailing Address		a DD		4. FEI Number		Apı	plied For	
21 2512 Westgate DR 2512 Westga Suite, Apt. #. etc. Suite, Apt. #. etc.		e Dr		58 1625786			t Applicable	
	7 ** 11 // 07				5. Certifcate of Status Desired	X	\$8.75 A	
	City & State City & State				6. Election Campaign Financin	<u> </u>	\$5.00	
23 Albany	3 Albany, GA 28 Albany, GA				Trust Fund Contribution	g 🗆	Added to	
Zip Country Zip		Country		- 8. This corporation owes the co	ırrent year-Int	•		
			30 Doug	gherty	Personal Property Tax.	· Posistored		□No
9. Name and Address of Current Registered Agent 10. Name and Address of New Reg							-tgerit	
Burke, James W.				Ct-n-t A	Idea - /D O. Bou Number in Net Acces	-tabla)		
1020 Arredondo St				Street Ad	ddress (P.O. Box Number is Not Accep	otable)		
Lake City, FL 32055 US			83					
			84	City			85 Zip C	ode
						FL		
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								
	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	da Statutes					i
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: F	Registered Agen	t signature requ	sired when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO C	FFICERS AN	D DIRECTO	RS IN 12
TITLE	President / Director DELETE		1.1 TITLE	1			Change	Addition
NAME	Erickson, Richard J. 6807 Stuart Lane		1.2 NAME					
STREET ADDRESS	Jacksonville, FL 32254		1.3 STREET					ļ
CITY-ST-ZIP TITLE	Vice President / Director DELETE		1.4 CITY-S' 2.1 TITLE	!-ZIP			Change	☐ Addition
NAME	vice fresident / Director —		2.2 NAME				_ , ,	
STREET ADDRESS	ADDRESS COOK, Hurley S., Jr.		2.3 STREET	ADDRESS				
CITY-ST-ZIP	TADDRESS 100 Minus Avenue St. ZIP Savannah, GA 31408			T- ZIP				
TITLE	Secretary / Director		3.1 TITLE 3.2 NAME				Change	Addition
NAME	Burke, James W.							
STREET ADDRESS	Tala 014. ET 22056			ADÓRESS				
CITY-ST-ZIP	Treasurer / Director DELETE			T-ZIP			Change	☐ Addition
NAME	Smith. Ronald W		4.1 TITLE 4.2 NAME	ĺ			•	_
STREET ADDRESS	800 North Patterson Street			ADDRESS				
CITY-ST-ZIP	Valdosta, GA 31015			- 21P	· 			
TITLE	Meadxxxxxxxxxxxxxxxxxx Assistant Secretary	Director	5.1 TITLE				Change	☐ Addition
NAME.	R. Jennings Head		5.2 NAME	ADDRESS				
STREET ADDRESS	2512 Westgate DR UN	it 21	5.3 STREET 5.4 CITY-ST					
CITY-ST-ZIP TITLE	Albany, GA 31707-2281		6.1 TITLE				Change	Addition
NAME	Director Brantley, W. F. "BU		6.2 NAME					
STREET ADDRESS	1518 South Alabama		6.3 STREET	ADDRESS				
CITY-ST-ZIP	Monroeville, AL3646		6.4 CITY-ST	-ZIP				

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. Jennings Head, Assistant Secretary/Director

10 Aptil 1999 912-883-140
Date Date Davime Phone #

Daytime Phone #

CR2E034 (11/98)