

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 29 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P24983

(9)

1. Corporation Name

PRECISION TUNE AUTO CARE, INC.,



Principal Place of Business

Mailing Address

748 MILLER DRIVE, S. E.  
P. O. BOX 5000  
LEESBURG VA 22075

748 MILLER DRIVE, S. E.  
P. O. BOX 5000  
LEESBURG VA 20177-0500

3. Date Incorporated or Qualified  
06/30/1989

3a. Date of Last Report  
02/21/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip  
24 20177-0500

25 Country

28 Zip  
29 20177-0500

30 Country

4. FEI Number

74-1557467

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

10. Name and Address of New Registered Agent

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

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 (same of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME RIPLEY, JOHN F  
STREET ADDRESS 748 MILLER DRIVE, S. E.  
CITY- ST- ZIP LEESBURG VA

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE VPT  
NAME BURGUIERES, ROBERT N.  
STREET ADDRESS 748 MILLER DR., SE  
CITY- ST- ZIP LEESBURG VA

☐ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE D  
NAME AL-AWADI, AHLAM  
STREET ADDRESS 748 MILLER DRIVE, S. E.  
CITY- ST- ZIP LEESBURG VA

☒ DELETE

3.1 TITLE VP  
3.2 NAME Paul Bernstein  
3.3 STREET ADDRESS 748 Miller Drive, S.E.  
3.4 CITY- ST- ZIP Leesburg, VA

☐ Change ☒ Addition

TITLE SRVP  
NAME JANOFKY, ARNOLD  
STREET ADDRESS 748 MILLER DR., SE  
CITY- ST- ZIP LEESBURG VA

☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE VP  
NAME CARROLL, WILLIAM T.  
STREET ADDRESS 748 MILLER DR., SE  
CITY- ST- ZIP LEESBURG VA

☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE VP  
NAME BALDWIN, LARRY D.  
STREET ADDRESS 748 MILLER DR., SE  
CITY- ST- ZIP LEESBURG VA

☒ DELETE

6.1 TITLE VP  
6.2 NAME Alan Caldwell  
6.3 STREET ADDRESS 748 Miller Drive, S.E.  
6.4 CITY- ST- ZIP Leesburg, VA

☐ Change ☒ Addition

14. I do 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 in an attachment with an address.

SIGNATURE:

Robert N. Burguires, VP-Treasurer 1/20/97 703-777-9095

Date

Daytime Phone #

0505130

CR2E034 (9/96)