

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 04, 1999 8:00 am  
Secretary of State

03-04-1999 90029 038 \*\*\*150.00

0538164

DOCUMENT # P92000004332

1. Corporation Name  
ZIGLAR'S AUTO SALES, INC.

Principal Place of Business  
1497 S FERDON BLVD  
CRESTVIEW FL 32536  
US

Mailing Address  
1497 S FERDON BLVD  
CRESTVIEW FL 32536  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/09/1992

4. FEI Number

59-3154698

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 owes the current year Intangible

Personal Property Tax.

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLEET, H. BART  
1201 EGLIN PKWY  
SHALIMAR FL 32579

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE  
NAME DAY, JENNIE NELL Z  
STREET ADDRESS 1585 SOUTH PEARL STREET  
CITY-ST-ZIP CRESTVIEW FL 32539

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

TITLE VP ☐ DELETE  
NAME DAY, JOHN G  
STREET ADDRESS 1585 SPEARL ST  
CITY-ST-ZIP CRESTVIEW FL 32539

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME Day, John G  
2.3 STREET ADDRESS 1585 South Pearl St  
2.4 CITY-ST-ZIP Crestview, FL 32539

TITLE V ☐ DELETE  
NAME ZIGLAR, HELEN  
STREET ADDRESS 5133 PARK STREET  
CITY-ST-ZIP CRESTVIEW FL 32539

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE V ☐ DELETE  
NAME ZIGLAR, ALONIA  
STREET ADDRESS 103 NOERTH LINCOLN STREET  
CITY-ST-ZIP CRESTVIEW FL 32536

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME Ziglar Alonia  
4.3 STREET ADDRESS 103 North Lincoln St.  
4.4 CITY-ST-ZIP Crestview, FL 32536

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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:

Jennie Nell Ziglar Day Jennie Nell Ziglar Day 2-11-99 (850) 682-7800  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)