03-29-1999 90080 048 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P92000011975

WAYNE'S PAINT & BODY, INC.						(1001106t 1(0 (B)t0 1)21(B)	II. A BIH ABKI ABIB	I 11 89 8 H BIO 18 06 II	
Principal Place	of Business	Mailing Address				 	III Ba iii Ba ii Ba i)	1845 Bill (88)
3831 WEST MAIN ST . 907 WEBSTER STREET					1				
LEESBURG FL 34748 LEESBURG FL 34748						DO NOT	NOTE IN THE	C CDACE	
US							VRITE IN THIS	SOPACE	
						3. Date Incorporated or Qual	Tea		
	in the state of th	20 Mailing Address				01/01/1993 4. FEI Number		T Apr	lied For
Principal Place of Business 2a. Mailing Addres						59-3160256			Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.								\$8.75 A	
						Certificate of Status Desire	d 🗆	Fee Rec	
22 27 City & State City & State			-			6. Election Campaign Finance	ina 🛋	\$5.00	Aav Be
2328						Trust Fund Contribution	^{ng} \Box	Added to	
Zip				Country 8. This corporation			current year In	tangible	
24	25 29 30				- 1	Personal Property Tax.		☐ Yes	□No
· - · · ·	9. Name and Address of Curren	t Registered Agent				10. Name and Address of No	w Registered	l Agent	
_			81	Name					
SELLAR, SEWELL, RUSS & SAYLOR, P.A.				82 Street Address (P.O. Box Number is Not Acceptable)					
907 WEBSTER STREET						V (10. 22x 110			
LEESBURG FL 34748			83						
			84	City				85 Zip C	ode:
							<u>Fl</u>	_ ``	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the above	-named	corpora	ation submits this statement for	the purpose o	f changing its	egistered
office or re agent. I ar	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut tions of, Section 607.0505, Florid	norized by ta Statutes	tne corpo	oration	s board of directors. Thereby a	crebi ille abbo	munem as reg	istered
SIGNATURE									
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: F		t signature n	required w	hen reinstating)	DATE	ND DIDECTOR	20.01.40
12.		ID DIRECTORS	13.		1	ADDITIONS/CHANGES TO	OFFICERS A	Change	Addition
TITLE	D	☐ DELETE	1.1 TITLE		1			☐ Change	L] Addition
NAME	BROWN, WAYNE H		1.2 NAME						
STREET ADDRESS	0001 11201 1111111 01		1.3 STREET	1					
CITY-ST-ZIP	LEESBURG FL	[] perett	1.4 CITY-S	r-ZIP	-			Change	Addition
mle		☐ DELETE	2.1 TITLE		D	own taula K 31 w main st		_ Gridings	Light y state to the
NAME			2.2 NAME		DI	a wi main st			
STREET ADDRESS				2.3 STREET ADDRESS 3		slourg Pl 34	-110		
CITY-ST-ZIP			2. 4 CITY-S	T-ZIP	Let	35burg, Pl 34	1.68	Change	Addition
TITLE ·	_		3.1 TITLE			•	• -	Change	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET						
CITY-ST-ZIP			3.4. CITY-S 4.1 TITLE	T- ZIP	 	±		☐ Change	☐ Addition
TITLE			4.1 IIILE 4. 2 NAME					23	
NAME				r anonree					
STREET ADDRESS				ADORESS					
CITY-ST-ZIP			4.4 CITY-S 5.1 TITLE	1-212	}			Change	Addition
TITLE			5.7 MAME					_ ,	_
NAME OTDECT ADDRESS			5.3 STREET	ADDRESS					
STREET ADDRESS			5.4 CITY-S						
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		1			Change	Addition
			6.2 NAME					_ ,	
NAME STREET ADODESS				TADDRESS					}
STREET AUDICESS			6.4 CITY-S						
CITY-ST-ZIP			a v v		1				

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 fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 is changed, or on an attachment with an address, with all other like empowered.

SIGNATURE