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FILED

Feb 21 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 # P93000051543 (5)

1. Corporation Name

CEDAR KEY AUTO PARTS AND MARINE INC.

Principal Place of Business

HIGHWAY 24 AND FIRST ST
CEDAR KEY FL 32675
US

Mailing Address

P.O. BOX 846
CEDAR KEY FL 32625-0846
US

3. Date Incorporated or Qualified

07/23/1993

3a. Date of Last Report

04/24/1996

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

30 Country

4. FEI Number

59-3194249

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

CRITTENDEN, THOMAS J III
1523 N. YOUNG BLVD.
US 19 NORTH
CHIEFLND FL 32626

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME CRITTENDEN, THOMAS J III
STREET ADDRESS RT 4 BOX 29
CITY - ST - ZIP CHIEFLND FL 32626

TITLE VD ☐ DELETE

NAME RUSS, JAMES A
STREET ADDRESS RT 4 BOX 29
CITY - ST - ZIP CHIEFLND FL 32626

TITLE STD ☐ DELETE

NAME CRITTENDEN, BRANDY
STREET ADDRESS RT 4 BOX 29
CITY - ST - ZIP CHIEFLND FL 32626

TITLE P ☐ DELETE

NAME CRITTENDEN, THOMAS J
STREET ADDRESS RT 4 BOX 29
CITY - ST - ZIP CHIEFLND FL 32626

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE same ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

1523 North Young Blvd
Chieflnd, FL 32626

2.1 TITLE same ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

1523 North Young Blvd
Chieflnd, FL 32626

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

Home, Brandy
1523 North Young Blvd
Chieflnd, FL 32626

4.1 TITLE same ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

1523 North Young Blvd
Chieflnd, FL 32626

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ 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 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.

SIGNATURE: Brandy Home Brandy Home STD

2/19/97

Date

Daytime Phone #

CR2E034 (9/96)