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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000058056 (1)

SUPER SPEEDY, INC.

**FILED** May 13 1998 8:00am Secretary of State



District Dis						! #######		
Principal Place of Business Mailing Address					t tentiebt ein felbe still Beill Sölls	43111 <b>26191 ÇIŞI IŞ</b> ILI		
101 EAST CITRUS STREET 101 EAST CITRUS STREET					1			
ALTAMONTE SPRINGS FL 32701 US		ALTAMONTE SPRINGS FL 32701 US			DO NOT WRITE IN THIS SPACE			
+		•			3. Date Incorporated or Qualified			
<u> </u>	_				08/16/1993			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		Applied For	
21		26			59-3207927	Not Applicable		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	☐ \$8	3.75 Additional	
22		27			51 Outmodes of states posited		Fee Required	
	City & State City & State						5.00 May Be	
Zip	Country	Zip Country			Trust Fund Contribution		Added to Fees	
24	25	<u>├</u> ─ŋ	<del></del> 1	У	8. This corporation owes or has a	4.00		
24	9. Name and Address of Curre	29   nt Registered Agent	30]		Personal Property Tax due Jur  10. Name and Address of New F			
144	UNIS, BRENDA	· · · · · · · · · · · · · · · · · · ·	81	Name	10, THERE WILL PROGRESS OF HERE P	- State of Maci	``	
	50 WESTWOOD DRIVE		82				÷	
LONGWOOD FL 32779				Street A	ddress (P.O. Box Number is Not Accept	tible)		
FOLIGITOON I F ARLIA			83					
						·		
			84	City		FL 85	Zip Code	
11, Pursuant	to the provisions of Sections 607 050	02 and 607.1508, Florida Statute	es, the abov	/e-named d	corporation submits this statement for the		1 noina its registered	
office or r	registered agent, or both, in the State on tamiliar with, and accept the oblic	e of Florida, Such change was a	uthorized b	y the corpo	corporation submits this statement for the oration's board of directors. I hereby acc	ept the appointm	ent as registered	
	and the transfer to the configuration of the config	garions or, becoming our looks, rib	nua biatute					
SIGNATURE	Signature typed or ponted name of registered ap	rent and fille if applicable (NOTE	Registered Ag	jent signature ri	equired when reinstating)	DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRE	ECTORS IN 12	
TITLE	<b>VP</b> D	☐ DELETE	1.1 TITLE				hange Addition	
NAME	Manis, Brenda		1.2 NAME					
STREET ADDRESS	2250 WESTWOOD DRIVE		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	LONGWOOD FL		1.4 CHY-	ST-ZIP	Longwood, FL 32779			
TITLE	D	☐ DELETE	21 TITLE		-	C	hange 🔲 Addition	
NAME	MANIS, EVERETTE		2.2 NAME					
STREET ADDRESS	2250 WESTWOOD DRIVE		2.3 STREE	T ADDRESS				
CITY-ST-ZIP	LONGWOOD FL 32779		2. 4 CITY -	ST-ZIP				
TITLE	PO	☐ DELETE	3.1 TITLE			( <b>X</b> )	hange	
NAME	BOWMAR, WILLIAM D III		3.2 NAME					
STREET ADDRESS	101 E CITRUS ST		3.3 STREE	1 Address				
CITY-ST-ZIP	ALTAMONTE SPRINGS FL		3.4. CITY-	ST-ZIP	Altamonte Springs, FL			
TITLE	81	☐ DELETE	4.1 TITLE			<b>x</b> c	hange	
NAME	BOWAR, CHRISTINA D		4. 2 NAME	[1	Bowmar, Christina D.			
STREET ADORESS	101 E CITRUS ST		4.3 STREF	ADDRESS				
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	····	4.4 CITY-	ST-ZIP	Altamonte Springs, FL	32701_		
TITLE		☐ DELETE	5.1 TITLE		. •	☐ C	hange 🔲 Addition	
NAME			52 NAME					
STREET ADDRESS			5 3 STREE	F ADDRESS				
CITY-ST-ZIP			5.4 CiTY-5	ST-ZIP				
TITLE		☐ DELETE	61 TITLE			c	hange Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	F ADDRESS				
CITY-ST-ZIP			6.4 CITY - 5					
14. I hereby o	ertify that the information cumuliorly	rith this filing doos not qualify for	the evene	tion etalod	Lin Section 119 07/3\/i) Florida Statuton	Literathor poetifical	act the information	

Indicated on this annual report or supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio 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.