

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 3: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000068280 (5)

1. Corporation Name

D & T AUTOMOTIVE & TOWING, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business

639 8TH AVENUE WEST
PALMETTO FL 34221

Mailing Address

639 8TH AVENUE WEST
PALMETTO FL 34221

2. Principal Place of Business

21

2a. Mailing Address

26

3. Date in Expiration or Qualified

09/24/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0459175

Applied For

Not Applicable

State, Apt. #, etc.

22

State, Apt. #, etc.

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24

Country

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under S. 190.012
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GRIMES, WILLIAM C
1023 MANATEE AVENUE WEST
BRADENTON FL 34205

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 607.0012 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 of Registered Agent or Registered Agent's authorized representative)

(Signature of Registered Agent or Registered Agent's authorized representative)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D

MCDONALD, GLINDA F
303 13TH AVENUE, WEST
PALMETTO FL 34221

2. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D

MCDONALD, NEAL A
303 13TH AVENUE, WEST
PALMETTO FL 34221

3. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D

DENION, LINDA
715 12TH AVENUE WEST
PALMETTO FL 34221

4. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D

SMITH, DAVID R
715 12TH AVENUE WEST
PALMETTO FL 34221

5. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

6. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

2. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

3. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

4. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

5. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

6. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

14. I, the undersigned, certify that the information required with this filing is voluntarily furnished and does not qualify for the exemption stated in law (see 190.012, Florida Statutes). I further certify that the information made subject to the annual report or supplemental annual report is true and accurate and that my signature shall cause the same legal effect as if made under oath. That I am eligible to be elected to the corporation or the resignation or resignation is proposed to be made after this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1 of the Block 1 of the Department of State's annual report with an address.

SIGNATURE:

Glinda F McDonald Glinda F McDonald

4/26/95 8137473783

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR