

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000077119 (4)

1. Corporation Name

DUNNELLO CAR WASH, INC.



Principal Place of Business

Mailing Address

20483 E PENNSYLVANIA AVE
DUNNELLO FL 34432
US

9400 SW 200TH COURT
DUNNELLO FL 34431

3. Date Incorporated or Qualified
11/01/1993

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

10424 Calle-De-Flores Dr.

59-3209627

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

22

27

Clermont, FL 34711

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

23

28

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEPHENS, MONROE S
9400 SW 200TH COURT
DUNNELLO FL 34431

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

10424 Calle-De-Flores Drive

83

84 City

Clermont

FL

85 Zip Code
34711

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 Monroe S. Stephens, Agent

(NOTE: Registered Agent Signature required when reappointing)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE

NAME STEPHENS, MONROE S
STREET ADDRESS 9400 SW 200TH COURT
CITY-STATE-ZIP DUNNELLO FL

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

10424 Calle-De-Flores Drive
Clermont, FL 34711

TITLE DV ☐ DELETE

NAME SUMMERS, PETER J.
STREET ADDRESS 4098 N. LONGVALLEY ROAD
CITY-STATE-ZIP HERNANDO FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

TITLE DS ☐ DELETE

NAME SUMMERS, VICKIE L.
STREET ADDRESS 4098 N. LONGVALLEY ROAD
CITY-STATE-ZIP HERNANDO FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

TITLE DT ☐ DELETE

NAME STEPHENS, EARLINE L.
STREET ADDRESS 9400 SW 200TH COURT
CITY-STATE-ZIP DUNNELLO FL

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

10424 Calle-De-Flores Drive
Clermont, FL 34711

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Monroe S. Stephens, Pres. *Monroe S. Stephens Pres. 4-25-96* (352) 242-4429

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)