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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 29 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000077119 (4)

DUNNELLON CAR WASH, INC.

Principal Place of Business		Mailing Address				
20483 E PENINSYLVANIA AVE		4098 N LONG VALLEY RD				
DUNNELLON FL 34432		HERNANDO FL 34442 US		DO NOT WRITE IN	THIS SPACE	
1 ~~		00			3. Date Incorporated or Qualified	
					11/01/1993	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3209627	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27				Fee Required
City & Stat	0	City & State			6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Z(p	Count	n/	Trust Fund Contribution	
24	25	29	30	'y	This corporation owes or has paid to Personal Property Tax due June 30	
24	g. Name and Address of Current		1301		10. Name and Address of New Regis	
ים	ARVILLE, BRENDA L		8	1 Name		
19120 E PENNSYLVANIA AVE			-		(0.0.0	· · · · · · · · · · · · · · · · · · ·
	INNELLON FL 34432		8	2 Street Add	ress (P.O. Box Number is Not Acceptable)	•
1	THE STAGE		8	3		
			-	4 65		14-1-40-6-4
1			8	4 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the abo	ve-named corp	poration submits this statement for the purp	pose of changing its registered
office or r	egistered agent, or both, in the State c i m familiar with, and accept the obligat	of Florida. Such change was tions of, Section 607.0505, F	authorized Iorida Statut	by the corpora es.	tion's board of directors. I hereby accept the	ne appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered agent			gent signature requi		DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER	
TITLE	OP MONDOE O	☐ DELETE	1.1 TITLE			Change Addition
NAME	STEPHENS, MONROE S		1.2 NAM			
STREET ADDRESS	721 E LAKESHORE DR LANDRUM SC		E .	ET ADDRESS		
CITY-ST-ZIP	DV	☐ DELE TE	1.4 CITY 2.1 TITLE			☐ Change ☐ Addition
TITLE NAME	S UMMERS, PETER J.					Circulate Circulati
STREET ADDRESS	4098 N. LONGVALLEY ROAD		2.2 NAM			
	HERNANDO FL			ET ADDRESS		
CITY-ST-ZIP	DS DS	DELETE	3.1 TITLE	- ST- ZIP		Change Addition
NAME	SUMMERS, VICKIE L.	—-	3.2 NAM			<u> </u>
STREET ADDRESS	4098 N. LONGVALLEY ROAD			ET ADDRESS		
CITY-ST-ZIP	HERNANDO FL			- ST - ZiP		
TITLE	DT	☐ DELETE	4.1 TITLE			Change Addition
NAME	STEPHENS, EARLINE L.		4. 2 NAM	E		
STREET ADDRESS	721 E LAKESHORE DR		4.3 STRE	ET ADDRESS		1
CITY+ST-ZIP	LANDRUM SC		4.4 CITY			
TITLE		DELETE 5.1				Change Addition
NAME			5.2 NAM	:		
STREET ADDRESS			53 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 City	·ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		·	☐ Change ☐ Addition
NAME	ı		62 NAM			
STREET ADDRESS			63 STRE	ET ADDRESS		

6.4 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 suppliemental 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.