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

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

Corporation Name	F94000000700	(3)

THOMPSON TIRE COMPANY, INC. Principal Place of Business Mailing Address



Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Ci	JACKSONVILLE FL 32304		JACKSONVILLE FL 32304					
Summary   Summ						·	1	
Successful August 1	<ol><li>Principal Pla</li></ol>	ce of Business	2a. Mailing Address				······································	Applied For
Cry & State	21		<del>                                      </del>			59-3247461		Not Applicable
28	Suite, Apt. #	, etc.				5. Certificate of Status Desired		
25   26   26   30   30   Florida Statutes   7/10s   No.	City & State		<u>⊢</u> ¬ ′					• • • • •
BOONE, PAUL S 1221 KING STREET JACKSON/LLE FL 32204  82 Street Address (P.O. Box Number is Not Acceptable)  13. Pursuant to the provisions of Sections 607,0002 and 607,1508, Floridal Statutes, the above named corporation submiss this statement for the purpose of changing is 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 exploriment as registered agent, and the corporation and the corporation's board of directors. I hereby accept the exploriment as registered agent, and the corporation's board of directors. I hereby accept the exploriment as registered agent, and the corporation's board of directors. I hereby accept the exploriment as registered agent, and the corporation's board of directors. I hereby accept the exploriment as registered agent, and the corporation's board of directors. I hereby accept the exploriment as registered agent, and the corporation's board of directors. I hereby accept the exploriment as registered agent, and acceptable agent agent and the relations of the corporation's board of directors. I hereby accept the exploriment as registered agent, and acceptable agent agent agent agent agent agent and acceptable agent ag	Zip		<del>                                     </del>	<b>├</b> ─¬	<i>y</i>			nders 199.032,
BOONE, PAUL S 1221 KING STREET JACKSONVILE FL 32204  88  80  64  City  FL  85  Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fonds Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Fords Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a more decorption obligation of Scotion 607.0505, Provide Statutes  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/OHANGES TO OFFICER AND DIRECTORS IN 12  12. NAME  THOMPSON, NANCY L  1104 WEST BEAVER ST  1104 WEST BEAVER ST  12. ST DELETE  1. ST DELETE  2. TIME  ST DELETE  2. STREET ADDRESS  1. STR	L	9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered Age	ent
1221 KING STREET JACKSONNLIE FL 32204  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered office formative with, and accept the obligations of, Section 607.0502 and 607.1508. Florids Statutes, the above named 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, bridge Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with an accept the obligations of, Section 607.0505, bridge Statutes.  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THOMPSON, NANCY L  13. STREET ADDRESS  1104 WEST BEAVER ST  23. STREET ADDRESS  1104 WEST BEAVER ST  24. STREET ADDRESS  1104 WEST BEAVER ST  25. THILE  10. Change  Addition  NAME  1104 WEST BEAVER ST  25. STREET ADDRESS  1104 WEST BEAVER ST  26. STREET ADDRESS  1104 WEST BEAVER ST  27. STATE  1104 WEST BEAVER ST  28. STREET ADDRESS  1104 WEST BEAVER ST  29. ADDRESS  1104 WEST BEAVER ST  29. NAME  30. STREET ADDRESS  1104 WEST BEAVER ST  20. STREET ADDRESS  20. STREET ADDRESS	i .			81	Name			
B8				82	Street A	ddress (P.O. Box Number is Not Acceptab	le)	
B4   City				83	<del> </del>			
The provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submats this statement for the purpose of changing its registered difficor 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 formation of might be composed agent of the composed of directors. I hereby accept the appointment as registered agent, I am formation of might be composed agent and the registered agent. I am formation of might be composed agent agent and the registered agent. I am formation of might be composed agent agreement and the number of might be composed agent agreement as a registered agent. I am formation of might be composed agent agreement as a registered agent. I am formation of might be composed agent agreement and the number of might be composed agent agreement and the number of might be composed agent. I am formation of might be composed agent agreement and the number of might be composed agent. I am formation of might be composed agent agreement agent agreement agent agent. I am formation of might be composed agent agreement agent agent agreement agent		OTTILLE I E DEZOT		84	City			70 Code
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12	SIGNATURE							istered agent. I am
THE	· · · · · · · · · · · · · · · · · · ·							RECTORS IN 12
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14. I do horeby 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: J