2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State
01-27-2003 90520 022 ***150.00

DOCUMENT # P94000008822

1. Entity Name
HEWETT TIRE & AUTO CENTER, INC.

Principal Place of Business
517 AIRPORT RD.
PANAMA CITY FL 32405

Mailing Address
517 AIRPORT RD.
PANAMA CITY FL 32405

900011580

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3239811 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HEWETT, SANDRA
329 HILAND DR.
PANAMA CITY FL 32404

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HEWETT, SANDRA 329 HILAND DR PANAMA CITY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Alexander HEWETT 329 HILAND DR. PANAMA City, FL 32404	☐ Change ☑ Addition C (TITLE)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HEWETT, BILLY E 329 HILAND DR PANAMA CITY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C AMANDA MATHIAS 329 HILAND DRIVE PANAMA City, FL 32404	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M HEWETT JR, BILLY E 1311 CROOKED LANE PANAMA CITY FL 32409	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C JARED HEWETT 16921 OAK DELL RD. FOUNTAIN, FL 32438	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HEWETT, KENDRA 4502 CARLA LN #3 PANAMA CITY FL 32405	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C HEWETT, ASHLEY G 329 HILAND DR. PANAMA CITY FL 32404	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sandra Hewett SIGNATURE REQUIRED 1-14-03 850-769-7069
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #