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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation Natite KWIK LUBE OF ENGLEWOOD, INC. Principal Place of Business 23367 WESTCHESTER BLVD PORT CHARLOTTE FL 33990 Mailing Address 23367 WESTCHESTER PORT CHARLOTTE			≀ BLVD					
					3. Date Incorporated or Qualified 02/28/1994		ate of Last Re 16/1996	eport
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number		Ap	plied For	
21	no mprior de la colora de l'archite de la martina de l'archite de l'ar	26	26		65-0481466	 .		ot Applicable
Suite, Apt.	#, ER:		27		5. Certificate of Status Desired		\$8.75 A Fee Re	
City & Stat		City & State			6. Election Campaign Financing	···	\$5.00	
23		28	28		Trust Fund Contribution		Added t	
Zφ	Country	Z ip	Country		8. This corporation has liability for			. 199.032.
24	25 29 30		30	······································	Florida Statutes Yes No			
	9. Name and Address of Cur	rent Registered Agent	81	Name	10. Name and Address of New R	egistered	Agent	
WEATHERLY, RICHARD K 23367 WESTCHESTER BLVD				Name				
	RT CHARLOTTE FL 33980		82	82 Street Address (P.O. Box Number is Not Acceptable)				
run	II DUMPOLIE LE 00800		63					
			84	·		~ ~~		·····
				City		FL	85 Zip (Code
11. Pursuant office or r agent La	to the previsions of Sections 607.0 registered agent, or both, in the Stam familiar with, and accept the ob-	502 and 607.1508, Florida Statut ate of Florida. Such change was a ligations of, Section 607.0505, Flo	es, the above authorized by orida Statutes	e-named corp the corporati	oration submits this statement for the on's board of directors. I hereby acce	purpose c pt the app	if changing it cointment as	s registered registered
SIGNATURE	Signature, typical or printed name of registered	agent and tile if applicable (NOT	E. Registered Age	ent signature require	ed when reinstating)	DATE		
12,		AND DIRECTORS	~		ADDITIONS/CHANGES TO OFF		D DIRECTOR	1S IN 12
TITLE	D DELETE WEATHERLY, RICHARD K		1.1 TITLE				Change	Addition
NAME			12 NAME	1				
STREET ADORESS	23367 WESTCHESTER BLVD		1.3 STREET	ADDRESS				ļ
CITY-SI-ZIP	PORT CHARLOTTE FL 3398		1.4 CITY - ST - ZIP					
TITLE		DELETE 21					☐ Change	Addition
NAME	1 ° °		2.2 NAME					
STREET ADDRESS			2.3 STREET					l
CITY - ST - ZIP			2.4 CITY-S 3.1 TITLE	51-21			Change	Addition
NAME		3.		l				
STREET ADDRESS			3,3 STREET	ADDRESS				ŧ
CITY - ST - 7IP			3.4. CITY - S	ļ				
TITLE		☐ DELETE	4.1 TOTLE				Change	Addition
NAME			4, 2 NAME					ĺ
STREET ADDRESS			4.3 STREET	ADDRESS				ļ
CiTY-ST-7#			4.4 CITY - S	IT-ZIP	·			
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME			5.2 NAME					l
STREET ADDRESS			5.3 STAEET	· · · · · · · · · · · · · · · · · · ·				
City St-7IP				ST-ZIP			Change	☐ Addition
NAME		hand Dereit	6.1 TITLE 6.2 NAME	1			Oligitys.	codition
STREET ADDRESS			6.3 STREET	ADDRESS				ſ
SINCLE MUSINESS			CARITY 6					ŧ

0408498

14. I do 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 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

941 475 0711

FILED

May 02 1997 8:00am

Secretary of State