

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

FLORIDA DEPARTMENT OF
CORPORATION



FLORIDA DEPARTMENT OF STATE
JAMES H. WATSON
GOVERNOR

1995

FILED
SECRETARY OF STATE
OF CORPORATIONS

95 MAY -1 AM 10:29

DOCUMENT # **P94000046018 (5)**

DAMRON PARTS REPLACEMENT CORPORATION

P.O. BOX 2349
HIGHWAY 486
CRYSTAL RIVER FL 32629-2349

P.O. BOX 2349
HIGHWAY 486
CRYSTAL RIVER FL 32629-2349

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification **06/20/1994** 3a. Date of Last Report

4. FIC Number **59-3251321** Applied For Not Applicable

5. Certificate of Status Due ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. Does corporation have liability for intangible tax under § 193.032, Florida Statutes? ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GASSMAN, ALAN S
1212 COURT ST.
SUITE 0
CLEARWATER FL 34616

81 Name
82 Street Address (P.O. Box Number is Not Applicable)
1245 COURT STREET
83 **SUITE 102**
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Chapter 193, Laws of 1987, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office as set forth in the State of Florida. The change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I agree to accept the obligations of the Secretary of State, Florida Statutes.

12. Name and Address of Registered Agent

13. ADDITIONAL CHANGES TO BE FILED AND OTHER INFORMATION

D
DAMRON, LEONARD A III
HIGHWAY 486
CRYSTAL RIVER FL 32629-2349

1. NAME	Change	Addition
2. STREET ADDRESS	Change	Addition
3. CITY	Change	Addition
4. NAME	Change	Addition
5. STREET ADDRESS	Change	Addition
6. CITY	Change	Addition
7. NAME	Change	Addition
8. STREET ADDRESS	Change	Addition
9. CITY	Change	Addition
10. NAME	Change	Addition
11. STREET ADDRESS	Change	Addition
12. CITY	Change	Addition
13. NAME	Change	Addition
14. STREET ADDRESS	Change	Addition
15. CITY	Change	Addition
16. NAME	Change	Addition
17. STREET ADDRESS	Change	Addition
18. CITY	Change	Addition
19. NAME	Change	Addition
20. STREET ADDRESS	Change	Addition
21. CITY	Change	Addition

14. I, the undersigned, certify that the information is given to me by the person who is authorized to provide the same, and that the information is true and accurate, and that my signature shall have the same legal effect as if made by the person who is authorized to provide the same. I agree to accept the obligations of the Secretary of State, Florida Statutes, and that my signature shall have the same legal effect as if made by the person who is authorized to provide the same.

SIGNATURE: *Leonard A. Damron III*

Leonard A. Damron III

11/27/95 904 746 3011

SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR SECRETARY