

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000073047 (0)

1. Corporation Name

CLEVELAND AUCTION, INC.

Principal Place of Business

5124 DUNCAN RD
RT. 17
PUNTA GORDA FL 33982

Mailing Address

5124 DUNCAN RD.
RT. 17
PUNTA GORDA FL 33982

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

10/05/1994

4. FEI Number

650525346

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. This corporation's compliance is subject to the provisions of
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ITTERSAGEN, SCOTT D
% BATSEL MCKINLEY ITTERSAGEN GUNDERSON
1861 PLACIDA RD., SUITE 104
ENGLEWOOD FL 34223

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.02(2) and 607.15(8), Florida Statutes, the above named corporation certifies the statement for the purpose of changing its 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 this appointment as registered agent. I am familiar with and accept the obligations of Sections 607.02(2) and 607.15(8), Florida Statutes.

SIGNATURE

(If the corporation is a foreign corporation, the signature must be of an authorized officer or agent.)

(If the corporation is a domestic corporation, the signature must be of an authorized officer or agent.)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME: D
PRIEBE, WESLEY C
STREET ADDRESS: 541 QUEENS AVE.
CITY: PORT CHARLOTTE FL 33952
NAME: D
PRIEBE, DELORES M
STREET ADDRESS: 541 QUEENS AVE.
CITY: PORT CHARLOTTE FL 33952
NAME: D
JONES, CLIFFORD A
STREET ADDRESS: 4501 ALTA VISTA DR.
CITY: PORT CHARLOTTE FL 33950
NAME: D
JONES, SUSAN K
STREET ADDRESS: 4501 ALTA VISTA DR.
CITY: PORT CHARLOTTE FL 33950
NAME: D
JONES, SUSAN K
STREET ADDRESS: 4501 ALTA VISTA DR.
CITY: PORT CHARLOTTE FL 33950
NAME: D
JONES, SUSAN K
STREET ADDRESS: 4501 ALTA VISTA DR.
CITY: PORT CHARLOTTE FL 33950
NAME: D
JONES, SUSAN K
STREET ADDRESS: 4501 ALTA VISTA DR.
CITY: PORT CHARLOTTE FL 33950

1. NAME ☐ Change ☐ Addition
2. NAME ☐ Change ☐ Addition
3. NAME ☐ Change ☐ Addition
4. NAME ☐ Change ☐ Addition
5. NAME ☐ Change ☐ Addition
6. NAME ☐ Change ☐ Addition
7. NAME ☐ Change ☐ Addition
8. NAME ☐ Change ☐ Addition
9. NAME ☐ Change ☐ Addition
10. NAME ☐ Change ☐ Addition
11. NAME ☐ Change ☐ Addition
12. NAME ☐ Change ☐ Addition
13. NAME ☐ Change ☐ Addition
14. NAME ☐ Change ☐ Addition
15. NAME ☐ Change ☐ Addition
16. NAME ☐ Change ☐ Addition
17. NAME ☐ Change ☐ Addition
18. NAME ☐ Change ☐ Addition
19. NAME ☐ Change ☐ Addition
20. NAME ☐ Change ☐ Addition
21. NAME ☐ Change ☐ Addition
22. NAME ☐ Change ☐ Addition
23. NAME ☐ Change ☐ Addition
24. NAME ☐ Change ☐ Addition
25. NAME ☐ Change ☐ Addition
26. NAME ☐ Change ☐ Addition
27. NAME ☐ Change ☐ Addition
28. NAME ☐ Change ☐ Addition
29. NAME ☐ Change ☐ Addition
30. NAME ☐ Change ☐ Addition
31. NAME ☐ Change ☐ Addition
32. NAME ☐ Change ☐ Addition
33. NAME ☐ Change ☐ Addition
34. NAME ☐ Change ☐ Addition
35. NAME ☐ Change ☐ Addition
36. NAME ☐ Change ☐ Addition
37. NAME ☐ Change ☐ Addition
38. NAME ☐ Change ☐ Addition
39. NAME ☐ Change ☐ Addition
40. NAME ☐ Change ☐ Addition
41. NAME ☐ Change ☐ Addition
42. NAME ☐ Change ☐ Addition
43. NAME ☐ Change ☐ Addition
44. NAME ☐ Change ☐ Addition
45. NAME ☐ Change ☐ Addition
46. NAME ☐ Change ☐ Addition
47. NAME ☐ Change ☐ Addition
48. NAME ☐ Change ☐ Addition
49. NAME ☐ Change ☐ Addition
50. NAME ☐ Change ☐ Addition
51. NAME ☐ Change ☐ Addition
52. NAME ☐ Change ☐ Addition
53. NAME ☐ Change ☐ Addition
54. NAME ☐ Change ☐ Addition
55. NAME ☐ Change ☐ Addition
56. NAME ☐ Change ☐ Addition
57. NAME ☐ Change ☐ Addition
58. NAME ☐ Change ☐ Addition
59. NAME ☐ Change ☐ Addition
60. NAME ☐ Change ☐ Addition
61. NAME ☐ Change ☐ Addition
62. NAME ☐ Change ☐ Addition
63. NAME ☐ Change ☐ Addition
64. NAME ☐ Change ☐ Addition
65. NAME ☐ Change ☐ Addition
66. NAME ☐ Change ☐ Addition
67. NAME ☐ Change ☐ Addition
68. NAME ☐ Change ☐ Addition
69. NAME ☐ Change ☐ Addition
70. NAME ☐ Change ☐ Addition
71. NAME ☐ Change ☐ Addition
72. NAME ☐ Change ☐ Addition
73. NAME ☐ Change ☐ Addition
74. NAME ☐ Change ☐ Addition
75. NAME ☐ Change ☐ Addition
76. NAME ☐ Change ☐ Addition
77. NAME ☐ Change ☐ Addition
78. NAME ☐ Change ☐ Addition
79. NAME ☐ Change ☐ Addition
80. NAME ☐ Change ☐ Addition
81. NAME ☐ Change ☐ Addition
82. NAME ☐ Change ☐ Addition
83. NAME ☐ Change ☐ Addition
84. NAME ☐ Change ☐ Addition
85. NAME ☐ Change ☐ Addition
86. NAME ☐ Change ☐ Addition
87. NAME ☐ Change ☐ Addition
88. NAME ☐ Change ☐ Addition
89. NAME ☐ Change ☐ Addition
90. NAME ☐ Change ☐ Addition
91. NAME ☐ Change ☐ Addition
92. NAME ☐ Change ☐ Addition
93. NAME ☐ Change ☐ Addition
94. NAME ☐ Change ☐ Addition
95. NAME ☐ Change ☐ Addition
96. NAME ☐ Change ☐ Addition
97. NAME ☐ Change ☐ Addition
98. NAME ☐ Change ☐ Addition
99. NAME ☐ Change ☐ Addition
100. NAME ☐ Change ☐ Addition

14. I, the undersigned, certify that the information required with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.02(2)(b), Florida Statutes. I further certify that this information was obtained from the annual report or supplemental annual report in time and in substance and that my signature shall have the same legal effect as if made by the entity that is the officer or director of the corporation or the person or persons named in the report as required by Chapter 607, Florida Statutes, and that my name appears in the report as required by Chapter 607, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-95 515 6070