

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 20 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000076019 (6)

1. Corporation Name

FOUR POINTS AUTO REPAIR AND SALES INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/14/1994	3a. Date of Last Report
4. FEI Number 65-0547221	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
8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. 4436 GUN CLUB ROAD WEST PALM BEACH FL 33406	26. 4436 GUN CLUB ROAD WEST PALM BEACH FL 33406
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State	28. City & State
24. Zip	29. Zip
Country	Country

9. Name and Address of Current Registered Agent

**BROWNE, PERCY
4436 GUN CLUB ROAD
WEST PALM BEACH FL 33406**

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 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this 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 the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	BROWNE, PERCY	1.2 NAME	
STREET ADDRESS	4436 GUN CLUB ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	1.4 CITY-ST-ZIP	
TITLE	PRESIDENT	2.1 TITLE	☐ Change ☐ Addition
NAME	BROWNE, PERCY	2.2 NAME	
STREET ADDRESS	4436, GUN CLUB RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	2.4 CITY-ST-ZIP	
TITLE	VICE PRESIDENT	3.1 TITLE	☐ Change ☐ Addition
NAME	BROWNE, ANDREA	3.2 NAME	
STREET ADDRESS	4436, GUN CLUB RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	3.4 CITY-ST-ZIP	
TITLE	SECRETARY TREASURER	4.1 TITLE	☐ Change ☐ Addition
NAME	BROWNE, ANDREA	4.2 NAME	
STREET ADDRESS	4436, GUN CLUB RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby 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: **Percy C. Browne** 4/17/95 407 683 8336
SIGNATURE AND TYPED OR PRINTED NAME OF BRINGING OFFICER OR DIRECTOR